Entered 08/24/18 08:54:51 Case 18-23900 Doc 1 Filed 08/24/18 Desc Main Document Page 1 of 54 Fill in this information to identify your case: NORTHERN DISTRICT OF ILLINOIS United States Bankruptcy Court for the: AUG 24 2018 Northern District of Illinois Case number (if known): Chapter you are filing under: JEFFREY P. ALLSTEADT, CLERK INTAKE 1 Chapter 7 Chapter 11 Chapter 12 ☐ Chapter 13 Check if this is an amended filing Official Form 101 Voluntary Petition for Individuals Filing for Bankruptcy 12/17 The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a joint case—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses Debtor 1 and Debtor 2 to distinguish between them. In joint cases, one of the spouses must report information as Debtor 1 and the other as Debtor 2. The same person must be Debtor 1 in all of the forms. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number Part 1: **Identify Yourself** About Debtor 1: About Debtor 2 (Spouse Only in a Joint Case): 1. Your full name Write the name that is on your Lakena government-issued picture First name identification (for example, First name your driver's license or D. passport). Middle name Middle name Staples Bring your picture identification to your meeting Last name Last name with the trustee. Suffix (Sr., Jr., II, III) Suffix (Sr., Jr., II, III) 2. All other names you have used in the last 8 First name vears Include your married or Middle name Middle name maiden names. Last name Last name First name First name Middle name Middle name Last name Last name 3. Only the last 4 digits of xxx - xx - <u>5</u> <u>5</u> <u>1</u> <u>1</u> your Social Security XXX number or federal Individual Taxpayer 9 xx - xx -Identification number 9 xx - xx -_____ (ITIN)

Case 18-23900 Doc 1 Filed 08/24/18 Entered 08/24/18 08:54:51 Desc Main Document Page 2 of 54

| Debtor 1 | | D. Staples | - | Case number (# known) | |
|-----------------------------|--|--|--|---|-------------------------------|
| * ************ | The state of the s | Edd Hairie | | | |
| | | About Debtor 1: | Amerika da | About Debtor 2 (Spouse Only in a Joint Ca | |
| and E Identif (EIN) y | usiness names mployer fication Numbers you have used in | I have not used any t | ousiness names or EINs. | ☐ I have not used any business names or E | INs. |
| the las | st 8 years trade names and | Business name | | Business name | |
| doing b | usiness as names | Business name | | Business name | • |
| | | EIN | | EIN | |
| | | EIN | THE STATE OF THE S | EIN | |
| . Where | you live | TO THE WASHINGTON TO SERVE AND AND APPEAR OF BUILDING TO PROMISE AND AND APPEAR OF THE SERVE AND AND APPEAR OF THE SERVE APPEA | en e | If Debtor 2 lives at a different address: | licharos en grada (1937-1944) |
| | | 3709 West Arthingto | on | | |
| | | Number Street | | Number Street | |
| | | Apt 3 | | | |
| | | Chicago City | IL 60624 State ZIP Code | City State ZIF | P Code |
| | | Cook | | Zir | Code |
| | | County | | County | |
| | | If your mailing address in above, fill it in here. Note any notices to you at this r | that the court will send | If Debtor 2's mailing address is different fro yours, fill it in here. Note that the court will se any notices to this mailing address. | m end |
| | | Number Street | | Number Street | |
| | | P.O. Box | | P.O. Box | |
| | Control of the Contro | City | State ZIP Code | City State ZIP | Code |
| Why yo | u are choosing trict to file for | Check one: | este (1948) have been eller have hely a have properly as over 11 (1942) and 1944 and 1944 are have been a prop | Check one: | |
| bankrup | | Over the last 180 days I have lived in this district. | ict longer than in any | Over the last 180 days before filing this petit I have lived in this district longer than in any other district. | ion, |
| | | ☐ I have another reason. (See 28 U.S.C. § 1408. | Explain.) | ☐ I have another reason. Explain. (See 28 U.S.C. § 1408.) | |
| | | | | | |
| | | | | | |
| | | | | | |

Case 18-23900 Doc 1 Filed 08/24/18 Entered 08/24/18 08:54:51 Desc Main Document Page 3 of 54

| Debtor 1 Lakena [| | Staples Last Name | | | Case number (A | (known) |
|---|------------------|--|--|--|--|---|
| | | | | | | |
| Tell the Court Ab | out Your | Bankruptcy Case | 9 | | | |
| The chapter of the Bankruptcy Code you | Check for Bai | one. (For a brief des | cription of each, se)). Also, go to the t | ee No op of _l | tice Required by 1 page 1 and check | 1 U.S.C. § 342(b) for Individuals Filing the appropriate box. |
| are choosing to file under | | apter 7 | | | | , |
| | ☐ Ch | apter 11 | | | | |
| | ☐ Ch | apter 12 | | | | |
| | ☐ Ch | apter 13 | | | | |
| How you will pay the fee | you sub with | price to more unuself, you may pay omitting your payment a pre-printed address to pay the feed | with cash, cash ent on your behaviress. in installments uals to Pay The be waived (You but is not require official poverty lents). If you cho | you inter's alf, you self, you self, you self, you self, you self, interest the self, int | may pay. Typica check, or money ur attorney may bu choose this of Fee in Installment request this opwaive your fee, at applies to your is option, your may be checked. | neck with the clerk's office in your lly, if you are paying the fee or order. If your attorney is pay with a credit card or check potion, sign and attach the ents (Official Form 103A). Ition only if you are filing for Chapter of and may do so only if your income is ar family size and you are unable to nust fill out the Application to Have the with your petition. |
| Have you filed for bankruptcy within the | ☑ No | | ************************************** | ••• | | |
| last 8 years? | Yes. | District | | When | MM / DD / YYYY | Case number |
| | | District | , | When | | Case number |
| | | | | | MM / DD / YYYY | Case Inditibel |
| | | District | 1 | When | MM / DD / YYYY | Case number |
| Are any bankruptcy | ☑ No | | • | | | |
| cases pending or being filed by a spouse who is | | Debtor | | | | Relationship to you |
| not filing this case with you, or by a business partner, or by an affiliate? | | District | | When | MM / DD / YYYY | Case number, if known |
| | | Debtor | | | | Relationship to you |
| | | District | V | Vhen | | Case number, if known |
| Oo you rent your esidence? | No. Yes. | Go to line 12. Has your landlord o | btained an eviction | | MM / DD / YYYY | |
| | | No. Go to line 1 | | | * | |
| | | Yes. Fill out <i>Initi</i> part of this bank | ial Statement Abou ruptcy petition. | t an E | viction Judgment . | Against You (Form 101A) and file it as |

Case 18-23900 Doc 1 Filed 08/24/18 Entered 08/24/18 08:54:51 Desc Main Document Page 4 of 54

| ebtor 1 | Lakena [| | Staples Last Name | | Case no | umber (# know | n) | |
|-----------------------|---|--------------|--|---|----------------------|---------------|--------------------|--|
| | | | Cost Name | | | | | |
| rt 3: | Report About Any | Busines | ses You Own as a \$ | ole Propr | rietor | | | |
| Aro vo | u a sole proprietor | J | | *************************************** | | | | |
| of any | full- or part-time | | Go to Part 4. | | | | | |
| busine | | ∟ Yes | s. Name and location of b | usiness | | | | |
| business | roprietorship is a s you operate as an | | | | | | | |
| individua separate | al, and is not a e legal entity such as | | Name of business, if any | | | | - HIND | |
| a corpor LLC. | ation, partnership, or | | Number Street | | | | | |
| lf you ha | ive more than one | | | | | | | |
| separate | prietorship, use a sheet and attach it | | | | | | | |
| o this pe | etition. | | City | | | State | ZIP Code | |
| | | | | | | | 211 0040 | |
| | | | Check the appropriate i | | | | | |
| | | | Health Care Busine | | | | | |
| | | | Single Asset Real E | | | § 101(51B) |) | |
| | | | Stockbroker (as def | | | | | |
| | | | Commodity Broker | as defined | in 11 U.S.C. § 101(6 | 3)) | | |
| | | | ■ None of the above | | | | | |
| Bankru | r 11 of the ptcy Code and a <i>small business</i> | any of t | an set appropriate deadlines. If you indicate that you are a small business debtor, you must attach your nost recent balance sheet, statement of operations, cash-flow statement, and federal income tax return or if ny of these documents do not exist, follow the procedure in 11 U.S.C. § 1116(1)(B). No. I am not filing under Chapter 11. | | | | | |
| | inition of <i>small</i> debtor, see | _ | | | | | | |
| | . § 101(51D). | □ NO. | I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy Code. | | | | | |
| | | 🖵 Yes. | Yes. I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Code. | | | | | |
| | | | | | | | | |
| t 41 R | leport if You Own | or Have | Any Hazardous Prop | erty or A | ny Property That | Needs i | mmediate Attention | |
| o you | own or have any | Z No | | | | | | |
| | / that poses or is to pose a threat | | What is the hazard? | | | | | |
| f immir | nent and | 100. | Trial is the Hazard: | | ****** | | | |
| | ble hazard to ealth or safety? | | | | | | | |
| Or do yo | ou own any | | | | | | | |
| | that needs | | If immediate attention is | s needed, v | why is it needed? | | | |
| or exam | ole, do you own | | | | | | | |
| hat must | e goods, or livestock be fed, or a building s urgent repairs? | | | | | | | |
| | | | Where is the property? | Page 1 | | | | |
| | | | | Number | Street | | | |
| | | | | | | | | |
| | | | | | | · | | |
| | | | | City | | | State ZIP Code | |

Case 18-23900 Doc 1 Filed 08/24/18 Entered 08/24/18 08:54:51 Desc Main Document Page 5 of 54

Lakena D. Staples

Case number (if known)_____

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

 Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

| I am not required | to receive a | a briefing | about |
|-------------------|--------------|------------|-------|
| credit counseling | o because o | f· | |

Incapacity. I have a mental illness or a mental

deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability. My physical disability causes me

to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty. I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before! filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

| L. | am not required | i to receive a | briefing | about |
|----|-------------------|----------------|----------|-------|
| | credit counseling | because of | : " | |

Incapacity. I have a mental illness or a mental

deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability. My physical disability causes me

to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty. I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

Case 18-23900 Doc 1 Filed 08/24/18 Entered 08/24/18 08:54:51 Desc Main Document Page 6 of 54

| D | ebtor 1 Lakena D First Name Middle Na | One Staples Last Name | Case number (# kt | nown) | | | | |
|-----|---|--|---|--|--|--|--|--|
| ī | art 6: Answer These Que | estions for Reporting Purpos | ses | | | | | |
| 16 | . What kind of debts do you have? | 16a. Are your debts prima as "incurred by an individu | rily consumer debts? Consumer debts? Consumer debts? In primarily for a personal, family, or hou | ofs are defined in 11 U.S.C. § 101(8) | | | | |
| | you have? | No. Go to line 16b. Yes. Go to line 17. | a personal, Januay, or nog | scriola pulpose. | | | | |
| | | 16b. Are your debts primar money for a business or in | rily business debts? Business debts vestment or through the operation of the | are debts that you incurred to obtain business or investment. | | | | |
| | | No. Go to line 16c. Yes. Go to line 17. | | | | | | |
| | | 16c. State the type of debts you | owe that are not consumer debts or but | siness debts. | | | | |
| 17. | Are you filing under Chapter 7? | ☐ No. I am not filing under Ch | napter 7. Go to line 18. | A Mary for the second and the second | | | | |
| | Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available for distribution to unsecured creditors? | ☑ No | er 7. Do you estimate that after any exer is are paid that funds will be available to | npt property is excluded and distribute to unsecured creditors? | | | | |
| 18. | How many creditors do you estimate that you owe? | ✓ 1-49 ☐ 50-99 ☐ 100-199 ☐ 200-999 | 1,000-5,000 5,001-10,000 10,001-25,000 | ☐ 25,001-50,000 ☐ 50,001-100,000 ☐ More than 100,000 | | | | |
| 19. | How much do you estimate your assets to be worth? | ✓ \$0-\$50,000 □ \$50,001-\$100,000 □ \$100,001-\$500,000 □ \$500,001-\$1 million | \$1,000,001-\$10 million \$10,000,001-\$50 million \$50,000,001-\$100 million \$100,000,001-\$500 million | \$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion | | | | |
| | How much do you estimate your liabilities to be? Sign Below | 2 \$0-\$50,000 □ \$50,001-\$100,000 □ \$100,001-\$500,000 □ \$500,001-\$1 million | \$1,000,001-\$10 million \$10,000,001-\$50 million \$50,000,001-\$100 million \$100,000,001-\$500 million | \$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion | | | | |
| Fo | r you | CONCCE. | d I declare under penalty of perjury that t | | | | | |
| | | of title 11, United States Code. In under Chapter 7, | apter 7, I am aware that I may proceed, if understand the relief available under eac | eligible, under Chapter 7, 11,12, or 13 ch chapter, and I choose to proceed | | | | |
| | pt ^e | If no attorney represents me and this document, I have obtained as | I did not pay or agree to pay someone wind read the notice required by 11 U.S.C. | who is not an attorney to help me fill out § 342(b). | | | | |
| | | I request relief in accordance with the chapter of title 11, United States Code, specified in this petition. | | | | | | |
| | | I understand making a false state with a bankruptcy case can result 18 U.S.C. §§ 152, 1341, 1519, ar | L REDUCTS DO EO SZOU UDER OF IMPERSANMEN | money or property by fraud in connection it for up to 20 years, or both. | | | | |
| | | Signature of Debtor 1 | Itaplia * Signatura | of Debtor 2 | | | | |
| | | Executed on $\frac{78-33}{MM / DD / YY}$ | Signature 2018 Executed | | | | | |

Case 18-23900 Doc 1 Filed 08/24/18 Entered 08/24/18 08:54:51 Desc Main Document Page 7 of 54

| Debtor 1 Lakena D. First Name Middle Nam | Staples Last Name | Case number (if known)_ | |
|---|--|---|---|
| For your attorney, if you are represented by one If you are not represented by an attorney, you do not need to file this page. | I, the attorney for the debtor(s) named in this petition, of to proceed under Chapter 7, 11, 12, or 13 of title 11, Us available under each chapter for which the person is elf the notice required by 11 U.S.C. § 342(b) and, in a casknowledge after an inquiry that the information in the so | declare that I have inf nited States Code, a ligible. I also certify t e in which 8 707(b)(/ | formed the debtor(s) about eligibility and have explained the relief that I have delivered to the debtor(s) |
| | Printed name Firm name | | |
| | Number Street | State | ZIP Code |
| | Contact phone | Email address | |
| | Bar number | State | |

Case 18-23900 Doc 1 Filed 08/24/18 Entered 08/24/18 08:54:51 Desc Main Document Page 8 of 54

| Debtor 1 | Lakena First Name | D. | Star Last N | | | Case r | number (if known |) | |
|------------------------|--|-------------------------------------|--|--|--|--|--|---|---|
| | 1 1 the days recovered | error or the entering of the engine | | - Charle Carrell Linguis in record and a consequence | | | | | |
| bankruptcy attorney | you are filing y without an | | themselv | nderstand th es successfi | an individual, to nat many people ully. Because ba re strongly urge | find it extre ankruptcy h | emely difficate | cult to repre | eant |
| an attorney | epresented y, you do no e this page. | | To be suc technical, dismissed hearing, o firm if you | cessful, you m and a mistake because you o r cooperate wit case is select | iust correctly file ar or inaction may af did not file a requir th the court, case t ted for audit. If that rotections, including | nd handle yo ffect your rigl red documen trustee, U.S. t happens, yo | ur bankrupt hts. For exa it, pay a fee trustee, bar ou could los | cy case. The mple, your ca on time, atter nkruptcy adm | ise may be nd a meeting or inistrator, or audit |
| | | | in your sch property of also deny case, such cases are | n ir you pian to nedules. If you r properly clain you a discharg i as destroying randomly audit | pperty and debts in p pay a particular d do not list a debt, n it as exempt, you ge of all your debts or hiding property ted to determine if serious crime; you | lebt outside of the debt may a may not be a if you do so by, falsifying re debtors have | of your bank y not be disc able to kee mething disl ecords, or ly e been acci | truptcy, you me charged. If yo p the property honest in you ing. Individual | nust list that debt ou do not list y. The judge can r bankruptcy |
| | | | Bankruptcy fraud is a serious crime; you could be fined and imprisoned. If you decide to file without an attorney, the court expects you to follow the rules as if you had hired an attorney. The court will not treat you differently because you are filing for yourself. To be successful, you must be familiar with the United States Bankruptcy Code, the Federal Rules of Bankruptcy Procedure, and the local rules of the court in which your case is filed. You must also be familiar with any state exemption laws that apply. | | | | | | |
| | | | Are you aw | rare that filing f | for bankruptcy is a | serious actio | on with long | -term financia | al and legal |
| | | | ☐ No | | | | | | |
| | | | ☑ Yes | | | | | | |
| | | | Are you aw inaccurate | are that bankri or incomplete. | uptcy fraud is a se you could be fined | erious crime a | and that if yo | our bankruptc | y forms are |
| | | | □ No | ,, | , | a or imprisorr | eu : | | |
| | | | Yes | | | | | | |
| | | | Yes. Nar | ne of Person | ay someone who is | | | | our bankruptcy forms? |
| | | | By signing have read a | nere, I acknowl | ledge that I unders I this notice, and I lose my rights or p | stand the risk am aware th | s involved in | n filing withou | it an attorney. I |
| | | × | Xak | max | More | X | | | |
| | | | Signature of | Debtor 1 | 2.6 | | Signature of [| Debtor 2 | |
| | | | Date | <u>() > 。ショー</u> MM / DD - / YY | <u>/2</u> 0/8/ | | Date | MM / DD / | YYYYY |
| | | | Contact phone | <u> 312-70</u> | 9-0147 | | Contact phone | | 1111 |
| | | | Cell phone | <u>3/2-70</u> | 9-0147 | | Cell phone | *** | |
| | | | Email address | lakens. | 2/4/20411 | / | Fmail address | | |

Entered 08/24/18 08:54:51 Desc Main Case 18-23900 Doc 1 Filed 08/24/18 Page 9 of 54 Document

| Debtor 1 | Lakena | D. | Staples |
|--------------------|----------------------|-----------------------------|-----------|
| | First Name | Middle Name | Last Name |
| Debtor 2 | | | |
| (Spouse, if filing |) First Name | Middle Name | Last Name |
| Jnited States | Bankruptcy Court for | the: Northern District of L | llinois |
| Case number | | the: Northern District of t | llinois |
| | (If known) | | |

☐ Check if this is an amended filing

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new Summary and check the box at the top of this page.

| Part 1: Summarize Your Assets | |
|--|---|
| 1. Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B | Your assets Value of what you own \$ 0.00 |
| 1b. Copy line 62, Total personal property, from Schedule A/B | \$688.00 |
| 1c. Copy line 63, Total of all property on Schedule A/B | \$ 688.00 |
| Part 2: Summarize Your Liabilities | |
| Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) | Your liabilities Amount you owe |
| 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D | \$0.00 |
| Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F | \$ |
| 3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F | + \$ 25,615.00 |
| Your total liabilities | \$ 25,615.00 |
| Cartes Summarize Your Income and Expenses | |
| Schedule I: Your Income (Official Form 1061) | |
| Copy your combined monthly income from line 12 of Schedule I | \$3,035.00 |
| Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J | \$3,747.00 |
| | |

Case 18-23900 Doc 1 Filed 08/24/18 Entered 08/24/18 08:54:51 Desc Main Document Page 10 of 54

| D | ebtor 1 | Lakena | | D. | Staples | Casa sussitive | | | |
|----|---|---|---------------------------------|--|--|---|---------------------------|-----------------------|--|
| | | First Name | Middle Name | Last Name | * | Case number (# known) | | | |
| | art 4: | Answer Th | ese Questic | ons for Adminis | trative and Statistic | al Records | | | |
| 6. | Are yo | u filing for ba | nkruptcy und | ler Chapters 7, 11 | , or 13? | | | | |
| | | . You have not! | | | | submit this form to the court with your o | other schedul | es. | |
| 7. | What k | ind of debt do | you have? | the Control of the Co | the thirth articles will be a local production of the contract | aran da karan da karan karan da karan d | | and the second | |
| | You fam | ur debts are pr ily, or househo | rimarily cons ld purpose." 1 | umer debts. Cons 11 U.S.C. § 101(8). | numer debts are those "in Fill out lines 8-9g for sta | curred by an individual primarily for a pitistical purposes. 28 U.S.C. § 159. | ersonal, | | |
| | Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules. | | | | | | | | |
| | | | 1 1 5 2 55 | A transport of the second seco | antino de la compositorio de la co | enter en la transportation de la company | distriction of the second | and the second second | |
| 8. | From the Form 12 | he <i>Statement (</i> 22A-1 Line 11; | of Your Curre OR, Form 12 | ent Monthly Incom 2B Line 11; OR , Fo | e: Copy your total currer orm 122C-1 Line 14. | nt monthly income from Official | \$ | 3,152.00 | |
| | | | | No. 10. No. 11 May of the control of the state of the sta | ener de Service engles e galage (° 1000). | | | | |

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

| | Total claim | |
|--|-------------|------|
| From Part 4 on Schedule E/F, copy the following: | | |
| 9a. Domestic support obligations (Copy line 6a.) | \$ | 0.00 |
| 9b. Taxes and certain other debts you owe the government. (Copy line 6b.) | \$ | 0.00 |
| 9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.) | \$ | 0.00 |
| 9d. Student loans. (Copy line 6f.) | \$ | 0.00 |
| Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.) | \$ | 0.00 |
| 9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.) | + \$ | 0.00 |
| 9g. Total. Add lines 9a through 9f. | \$ | 0.00 |

Case 18-23900 Doc 1 Filed 08/24/18 Entered 08/24/18 08:54:51 Desc Main Document Page 11 of 54

| Fill in this in | formation to ide | ntify your case and this | filing: |
|---------------------|---|-----------------------------|-----------|
| Debtor 1 | Lakena | D. | Staples |
| | First Name | Middle Name | Last Name |
| Debtor 2 | *************************************** | | |
| (Spouse, if filing) | First Name | Middle Name | Last Name |
| United States (| Bankruptcy Court for | the: Northern District of I | llinois |
| Case number | | | |
| ouse name. | | | |
| | | | |

Official Form 106A/B

Schedule A/B: Property

12/15

In each category, separately list and describe items. List an asset only once. If an asset fits in more than one category, list the asset in the category where you think it fits best. Be as complete and accurate as possible. If two married people are filling together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Describe Each Residence, Building, Land, or Other Real Estate You Own or Have an Interest In

| 1.1. | es. Where is the property? Street address, if available, or other description | What is the property? Check all that apply. Graph Single-family home Duplex or multi-unit building | Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: Creditors Who Have Claims Secured by Property. | | |
|-------------|--|---|---|---|--|
| | one and one in a talk and in a | ☐ Condominium or cooperative ☐ Manufactured or mobile home ☐ Land | Current value of the entire property? | Current value of the portion you own? | |
| | City State ZIP Code | Investment property Timeshare Other | Describe the nature of interest (such as fee the entireties, or a life | simple, tenancy by | |
| | | Who has an interest in the property? Check one. | and onthrough of a m | a adiatoj, ii kilowii. | |
| | County | Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another | Check if this is co | mmunity property | |
| | | | iam cuch as lacat | | |
| | | Other information you wish to add about this it property identification number: | | | |
| you 1.2. | own or have more than one, list here: Street address, if available, or other description | what is the property? Check all that apply. Single-family home Duplex or multi-unit building | | d claims on Schedule D: | |
| | own or have more than one, list here: Street address, if available, or other description | what is the property? Check all that apply. Single-family home | Do not deduct secured cia | d claims on Schedule D: ns Secured by Property. | |
| | | what is the property? Check all that apply. Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land | Do not deduct secured cla the amount of any secure Creditors Who Have Clair Current value of the | d claims on Schedule D: ns Secured by Property. Current value of the | |
| | | what is the property? Check all that apply. Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property Timeshare Other Other | Do not deduct secured cla the amount of any secure Creditors Who Have Clair Current value of the | d claims on Schedule D: ns Secured by Property. Current value of the portion you own? \$ of your ownership simple, tenancy by | |
| | Street address, if available, or other description | what is the property? Check all that apply. Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property Timeshare | Do not deduct secured clatte amount of any secure Creditors Who Have Clair Current value of the entire property? \$ Describe the nature of interest (such as fee | d claims on Schedule D: ns Secured by Property. Current value of the portion you own? \$ of your ownership simple, tenancy by | |

| | Case 18-2390 | | Filed 08/24/18 Document | Entered 08/24/18 Page 12 of 54 | 3 08:54:51 D | esc Main |
|--|--|----------------------|--|--|---------------------------------------|--|
| Debtor 1 | Lakena First Name Middle Nam | D. e Last Name | Staples | Case number (if ki | nown) | PANARAN EN AND E |
| | | | | | | |
| 1.3. | Street address, if available, or | | What is the property Single-family home Duplex or multi-unit | *** | the amount of any sec | I claims or exemptions. Put ured claims on Schedule D: laims Secured by Property. |
| | Street address, if available, or | other description | Condominium or co | operative | Current value of the entire property? | e Current value of the portion you own? |
| | | | Land | obile nome | \$ | \$ |
| | | | Investment propert | v | | |
| | City | State ZIP Code | Timeshare Other | | interest (such as f | e of your ownership ee simple, tenancy by life estate), if known. |
| | | | Who has an interest | in the property? Check one. | | |
| | | | Debtor 1 only | · · · | | |
| | County | | Debtor 2 only | | _ | |
| | | | Debtor 1 and Debto | r 2 only | | community property |
| | | | At least one of the d | lebtors and another | (see instructions | s) |
| | | | | ou wish to add about this ite | | |
| | | | | Part 1, including any entries | | e |
| you h | lave attached for Part 1. V | Vrite that number l | here | |) | · • |
| Part 2: | Describe Your Vel | nicles | | | | |
| you own 3. Cars, ☑ N | that someone else drives. I vans, trucks, tractors, sp | f you lease a vehicl | le, also report it on <i>Sche</i> | ther they are registered or r dule G: Executory Contracts a | | |
| ☐ Y | es | | | | | |
| 3.1. | Make: | | Debtor 1 only | in the property? Check one. | the amount of any sec | claims or exemptions. Put ured claims on Schedule D: laims Secured by Property. |
| | Year: | | Debtor 2 only | | | , , , |
| | adfination 1 | | Debtor 1 and Debto | | Current value of the entire property? | e Current value of the portion you own? |
| | Approximate mileage: | | At least one of the d | ebtors and another | | F |
| | Other information: | | Check if this is co | ommunity property (see | \$ | \$ |
| lf vou | own or have more than one | e describe here: | | | | |
| , 50 | | _, | 160 1 | to the many of O.S. | | |
| 3.2. | Make: | · | | in the property? Check one. | | claims or exemptions. Put |
| | Model: | | Debtor 1 only | | | ured claims on Schedule D: laims Secured by Property. |
| | Year: | | Debtor 2 only | | Current value of th | e Current value of the |
| | Approximate mileage: | | Debtor 1 and Debto | | entire property? | portion you own? |
| | - | | At least one of the d | ebtors and another | | • |
| | Other information: | | Check if this is co | ommunity property (see | \$ | \$ |
| | The state of the s | · | | | | |

Case 18-23900 Doc 1 Filed 08/24/18 Entered 08/24/18 08:54:51 Desc Main Page 13 of 54 Document Lakena D Staples Debtor 1 Case number (if known)_ First Name Middle Name Last Nam Who has an interest in the property? Check one. 3.3 Make: Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: Creditors Who Have Claims Secured by Property. Debtor 1 only Model: Debtor 2 only Year Current value of the Current value of the Debtor 1 and Debtor 2 only entire property? portion you own? Approximate mileage: At least one of the debtors and another Other information: Check if this is community property (see instructions) Who has an interest in the property? Check one. Make: 3.4 Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D. Debtor 1 only Model: Creditors Who Have Claims Secured by Property. Debtor 2 only Year: Current value of the Current value of the Debtor 1 and Debtor 2 only entire property? portion you own? Approximate mileage: At least one of the debtors and another Other information: Check if this is community property (see instructions) 4. Watercraft, aircraft, motor homes, ATVs and other recreational vehicles, other vehicles, and accessories Examples: Boats, trailers, motors, personal watercraft, fishing vessels, snowmobiles, motorcycle accessories ☐ No ☐ Yes Who has an interest in the property? Check one. Make: Do not deduct secured claims or exemptions. Put 41 the amount of any secured claims on Schedule D: Debtor 1 only Model: Creditors Who Have Claims Secured by Property. Debtor 2 only Year: Debtor 1 and Debtor 2 only Current value of the Current value of the Other information: At least one of the debtors and another entire property? portion you own? Check if this is community property (see instructions) If you own or have more than one, list here: Who has an interest in the property? Check one. Make: Do not deduct secured claims or exemptions. Put 4.2 the amount of any secured claims on Schedule D: Debtor 1 only Model: Creditors Who Have Claims Secured by Property. Debtor 2 only Year: Current value of the Current value of the Debtor 1 and Debtor 2 only entire property? portion you own? Other information: At least one of the debtors and another Check if this is community property (see instructions)

5 Add the dollar value of the portion you own for all of your entries from Part 2, including any entries for pages

you have attached for Part 2. Write that number here

0.00

Case 18-23900

Last Name

Document

Doc 1 Filed 08/24/18 Entered 08/24/18 08:54:51 Desc Main Page 14 of 54

Debtor 1

Lakena First Name

D.

Staples

Case number (# known)_

Describe Your Personal and Household Items

Middle Name

| D | you own or have any legal or equitable interest in any of the following items? | Current va portion you Do not deduc or exemption | u own? |
|-----|--|---|--------|
| 6. | Household goods and furnishings | | |
| | Examples: Major appliances, furniture, linens, china, kitchenware | | |
| | □ No | | |
| | ☑ Yes. Describe Household furniture, linens | \$ | 200.00 |
| 7. | Electronics | | |
| | Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music collections; electronic devices including cell phones, cameras, media players, games | | |
| | □ No | | |
| | Yes. Describe 2 televisions, 1 play station 3 | \$ | 300.00 |
| 8. | Collectibles of value | | |
| | Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles | | |
| | Q No | | |
| | Yes. Describe | \$ | 0.00 |
| 9. | Equipment for sports and hobbies | | |
| | Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments | | |
| | ☑ No | | |
| | ☐ Yes. Describe | \$ | 0.00 |
| 10 | Firearms | | |
| | Examples: Pistols, rifles, shotguns, ammunition, and related equipment No | | |
| | Yes. Describe | \$ | 0.00 |
| 11 | Clothes | **** | |
| | Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories | | |
| | ☑ No □ Yes. Describe | | |
| | Tes. Describe | \$ | 100.00 |
| 12 | Jeweiry | | |
| | Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver | | |
| | 2 No | | |
| | Yes. Describe | \$ | 0.00 |
| 13 | Non-farm animals | . * . * . * . * . * . * . * . * . * . * | |
| | Examples: Dogs, cats, birds, horses | | |
| | 2 No | ***** | |
| | ☐ Yes. Describe | \$ | 0.00 |
| 14. | Any other personal and household items you did not already list, including any health aids you did not list | | |
| | ☑ No | | |
| | Yes. Give specific information | \$ | 0.00 |
| 15. | Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached | <i>*</i> | 600.00 |
| | for Part 3. Write that number here | 5 | 600.00 |

Case 18-23900 Doc 1 Filed 08/24/18 Entered 08/24/18 08:54:51 Desc Main

Debtor 1

Lakena

D.

Document Staples

Page 15 of 54

Case number (# known)__

| Do you own or have any | r legal or equitable interest in | any of the following? | portion y | uct secured claim |
|---|--|--|-----------|-------------------|
| 16. Cash | have in vour wallet in vour have | | | |
| | nave in your wallet, in your nor | ne, in a safe deposit box, and on hand when you file your petition | | |
| ☐ No | | Cash | | |
| — 165 | | Cash: | \$ | 0.00 |
| and other s | savings, or other financial accor similar institutions. If you have n | unts; certificates of deposit; shares in credit unions, brokerage house nultiple accounts with the same institution, list each. | es, | |
| U No □ Yes | | Institution name: | | |
| | | institution name. | | |
| | 17.1. Checking account: | Chase Bank | \$ | 62.00 |
| | 17.2. Checking account: | | \$ | 0.00 |
| | 17.3. Savings account: | | \$ | 26.00 |
| | 17.4. Savings account: | | \$ | 0.00 |
| | 17.5. Certificates of deposit: | | \$ | 0.00 |
| | 17.6. Other financial account: | | - \$ | 0.00 |
| | 17.7. Other financial account: | | \$ | 0.00 |
| | 17.8. Other financial account: | | ~ \$ | 0.00 |
| | 17.9. Other financial account: | | - \$ | 0.00 |
| | | | | |
| | or publicly traded stocks investment accounts with brok | erage firms, money market accounts | | |
| ☑ No | | <u>.</u> | | |
| ☐ Yes | Institution or issuer name: | | | |
| | | | \$ | 0.00 |
| | | | \$ | |
| | | | \$ | 0.00 |
| | | | | |
| 19. Non-publicly traded s an LLC, partnership, | | rated and unincorporated businesses, including an interest in | | |
| ☑ No | Name of entity: | % of ownership: | | |
| Yes. Give specific information about | | 0% % | \$ | 0.00 |
| them | | | \$ | |
| | | 0% % | • | 0.00 |

0.00

Case 18-23900 Doc 1 Filed 08/24/18 Entered 08/24/18 08:54:51 Desc Main Page 16 of 54

Document Staples Lakena Debtor 1 Case number (# known)_

| | Non-negotiable instrume | ents are those you c | annot transfer to someone by signing or delivering them. | | |
|--------|--|--|---|----------------------|--|
| | ☑ No | | | | |
| | Yes. Give specific information about | Issuer name: | | \$ | 0.00 |
| | them | *** | | | |
| | | | | \$ \$ | 0.00 |
| | | | | Ψ | |
| | Retirement or pension | | | | |
| | | RA, ERISA, Keogh, | 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans | | |
| | ☑ No ☑ Yes. List each | | | | |
| , | account separately. | Type of account: | Institution name: | | |
| | | 401(k) or similar plar |); | \$ | 0.00 |
| | | Pension plan: | | \$ | 0.00 |
| | | IRA: | | \$ | 0.00 |
| | | Retirement account: | | \$ | 0.00 |
| | | Keogh: | | \$ | 0.00 |
| | | Additional account: | | \$ | 0.00 |
| | | Additional account: | | \$ | 0.00 |
| | Security deposits and property of all unused | | made so that you may continue service or use from a company | | |
| ì | Your share of all unused | deposits you have | made so that you may continue service or use from a company aid rent, public utilities (electric, gas, water), telecommunications | | |
| ; ; | Your share of all unused Examples: Agreements | deposits you have | | | |
| ; ; | Your share of all unused Examples: Agreements companies, or others | d deposits you have with landlords, prep | | | |
| ; ; | Your share of all unused Examples: Agreements companies, or others | d deposits you have with landlords, prep | aid rent, public utilities (electric, gas, water), telecommunications | \$ | 0.00 |
| ; ; | Your share of all unused Examples: Agreements companies, or others | d deposits you have with landlords, prep | aid rent, public utilities (electric, gas, water), telecommunications | \$ \$ | 0.00 |
| ; ; | Your share of all unused Examples: Agreements companies, or others | d deposits you have with landlords, prepared to the landlords of the landl | aid rent, public utilities (electric, gas, water), telecommunications nstitution name or individual: | \$ \$ \$ | 0.00 |
| ; ; | Your share of all unused Examples: Agreements companies, or others | d deposits you have with landlords, prepared to the landlords of the landl | aid rent, public utilities (electric, gas, water), telecommunications nstitution name or individual: | \$ \$ \$ \$ | 0.00 0.00 0.00 |
| ; ; | Your share of all unused Examples: Agreements companies, or others | d deposits you have with landlords, prepared to the landlords of the landl | aid rent, public utilities (electric, gas, water), telecommunications nstitution name or individual: | | 0.00 0.00 0.00 0.00 |
| ; ; | Your share of all unused Examples: Agreements companies, or others | d deposits you have with landlords, prepared to the landlords of the landl | aid rent, public utilities (electric, gas, water), telecommunications nstitution name or individual: | | 0.00 0.00 0.00 0.00 |
| ; ; | Your share of all unused Examples: Agreements companies, or others | deposits you have with landlords, prepaid rent: | aid rent, public utilities (electric, gas, water), telecommunications nstitution name or individual: | \$ | 0.00 0.00 0.00 0.00 0.00 |
| ; ; | Your share of all unused Examples: Agreements companies, or others | deposits you have with landlords, prepidence with landlords, prepidence with landlords, prepidence landlords, prepidence landlords, prepidence landlords, prepidence landlords, prepidence landlords, | aid rent, public utilities (electric, gas, water), telecommunications nstitution name or individual: | \$ | 0.00 0.00 0.00 0.00 0.00 0.00 |
| ; ; | Your share of all unused Examples: Agreements companies, or others | deposits you have with landlords, prepared landlords, prepared landlords, prepared landlords, prepared landlords, prepared landlords, prepared landlords, | aid rent, public utilities (electric, gas, water), telecommunications nstitution name or individual: | \$ | 0.00 0.00 0.00 0.00 0.00 |
| | Your share of all unused Examples: Agreements companies, or others No Yes | deposits you have with landlords, prepident landlords, landlo | aid rent, public utilities (electric, gas, water), telecommunications Institution name or individual: ental unit: | \$\$ \$\$ \$\$ | 0.00 0.00 0.00 0.00 0.00 0.00 |
| 23. | Your share of all unused Examples: Agreements companies, or others No Yes | deposits you have with landlords, prepident landlords, landlo | aid rent, public utilities (electric, gas, water), telecommunications nstitution name or individual: | \$\$ \$\$ \$\$ | 0.00 0.00 0.00 0.00 0.00 0.00 |
| 23. | Your share of all unused Examples: Agreements companies, or others No Yes | deposits you have with landlords, prepident landlords, landlo | aid rent, public utilities (electric, gas, water), telecommunications Institution name or individual: ental unit: t of money to you, either for life or for a number of years) | \$\$ \$\$ \$\$ | 0.00 0.00 0.00 0.00 0.00 0.00 |
| 23. | Your share of all unused Examples: Agreements companies, or others No Yes Annuities (A contract for No | deposits you have with landlords, prepared to the second of the second o | aid rent, public utilities (electric, gas, water), telecommunications Institution name or individual: ental unit: t of money to you, either for life or for a number of years) | \$\$ \$\$ \$\$ | 0.00 0.00 0.00 0.00 0.00 0.00 |
| 23. | Your share of all unused Examples: Agreements companies, or others No Yes Annuities (A contract for No | deposits you have with landlords, prepared to the second of the second o | aid rent, public utilities (electric, gas, water), telecommunications Institution name or individual: ental unit: t of money to you, either for life or for a number of years) | \$\$ \$\$ \$\$ | 0.00 0.00 0.00 0.00 0.00 0.00 |

Last Name

Debtor 1

Lakena First Name

D.

Document Staples

Case 18-23900 Doc 1 Filed 08/24/18 Entered 08/24/18 08:54:51 Desc Main Page 17 of 54 Case number (if known)_

| 24. Interests in an education I 26 U.S.C. §§ 530(b)(1), 529 | RA, in an account in a qualified ABLE program, or under a qualified state tuition program A(b), and 529(b)(1). | | |
|--|---|----------------------------------|--|
| ☑ No | | | |
| Yes | Institution name and description. Separately file the records of any interests.11 U.S.C. § 52 | 1(a): | |
| | institution name and description. Separately sie the records of any interests. (1 0.5.6. § 52 | i (<i>G)</i> . | |
| | | _ \$ | 0.00 |
| | , 0.00 | _ \$ | 0.00 |
| | | - \$ | 0.00 |
| , , | | | |
| 25. Trusts, equitable or future exercisable for your bene | interests in property (other than anything listed in line 1), and rights or powers fit | | |
| ☑ No | | | |
| ☐ Yes. Give specific | | : | 0.00 |
| information about them. | | \$ | 0.00 |
| • • • • • | marks, trade secrets, and other intellectual property names, websites, proceeds from royalties and licensing agreements | | |
| ☑ No | name, housed, proceed non-royanio and neoriting agreements | | |
| Yes. Give specific | | | |
| information about them. | ··· | \$ | 0.00 |
| | | | |
| 27. Licenses, franchises, and Examples: Building permits | other general intangibles , exclusive licenses, cooperative association holdings, liquor licenses, professional licenses | | |
| ☑ No | | | |
| Yes. Give specific | | | 2.00 |
| information about them. | ··· | \$ | 0.00 |
| | | | |
| Money or property owed to y | ou? | portion Do not d | t value of the you own? educt secured r exemptions. |
| 28. Tax refunds owed to you | ou? | portion Do not d | you own? educt secured |
| 28. Tax refunds owed to you 2 No | | portion Do not d | you own? educt secured r exemptions. |
| 28. Tax refunds owed to you ☑ No ☐ Yes. Give specific inform | nation Federal | portion Do not d | educt secured r exemptions. |
| 28. Tax refunds owed to you No Yes. Give specific information about them, including you already filed the second control of the sec | nation ing whether ne returns Federal: State: | portion Do not d claims o | you own? educt secured r exemptions. 0.00 0.00 |
| 28. Tax refunds owed to you No Yes. Give specific information about them, include | nation ing whether ne returns Federal: State: | portion Do not d claims o | educt secured r exemptions. |
| 28. Tax refunds owed to you No Yes. Give specific information about them, including you already filed the second control of the sec | nation ing whether ne returns Federal: State: | portion Do not d claims o | you own? educt secured r exemptions. 0.00 0.00 |
| 28. Tax refunds owed to you No Yes. Give specific information about them, including you already filed the second control of the sec | nation ing whether ne returns Federal: State: | portion Do not d claims o | you own? educt secured r exemptions. 0.00 0.00 |
| 28. Tax refunds owed to you No Yes. Give specific information about them, including you already filed than the tax years. 29. Family support | nation ing whether ne returns Federal: State: | portion Do not d claims o | you own? educt secured r exemptions. 0.00 0.00 |
| 28. Tax refunds owed to you No Yes. Give specific information about them, including you already filed than the tax years. 29. Family support | nation ing whether he returns Local: | portion Do not d claims o | you own? educt secured r exemptions. 0.00 0.00 |
| 28. Tax refunds owed to you No Yes. Give specific informabout them, includ you already filed thand the tax years. 29. Family support Examples: Past due or lum. | nation ing whether ne returns State: Local: p sum alimony, spousal support, child support, maintenance, divorce settlement, property settler | portion Do not d claims o | educt secured r exemptions. 0.00 0.00 0.00 |
| 28. Tax refunds owed to you No Yes. Give specific informabout them, including your already filed than the tax years. 29. Family support Examples: Past due or luming No | nation ing whether he returns State: Local: p sum alimony, spousal support, child support, maintenance, divorce settlement, property settler Maintenance. Alimony: | portion Do not d claims o | you own? educt secured r exemptions. 0.00 0.00 0.00 |
| 28. Tax refunds owed to you No Yes. Give specific informabout them, including your already filed than the tax years. 29. Family support Examples: Past due or luming No | nation ing whether he returns State: Local: p sum alimony, spousal support, child support, maintenance, divorce settlement, property settler mation | ssment | 9.00 own? educt secured r exemptions. 0.00 0.00 0.00 0.00 |
| 28. Tax refunds owed to you No Yes. Give specific informabout them, including your already filed than the tax years. 29. Family support Examples: Past due or luming No | nation ing whether ne returns State: Local: p sum alimony, spousal support, child support, maintenance, divorce settlement, property settler mation | ssment | 0.00 0.00 0.00 0.00 |
| 28. Tax refunds owed to you No Yes. Give specific informabout them, including your already filed than the tax years. 29. Family support Examples: Past due or luming No | nation ing whether he returns State: Local: p sum alimony, spousal support, child support, maintenance, divorce settlement, property settler mation | ssment | 0.00 0.00 0.00 0.00 0.00 0.00 |
| 28. Tax refunds owed to you No Yes. Give specific informabout them, including your already filed than the tax years. 29. Family support Examples: Past due or luming No | nation ing whether ne returns State: Local: p sum alimony, spousal support, child support, maintenance, divorce settlement, property settler mation | ssment | 0.00 0.00 0.00 0.00 |
| 28. Tax refunds owed to you No Yes. Give specific information about them, including your already filed the and the tax years. 29. Family support Examples: Past due or luming No Yes. Give specific informations 30. Other amounts someone Examples: Unpaid wages, or Social Security | nation ing whether he returns State: Local: p sum alimony, spousal support, child support, maintenance, divorce settlement, property settler mation | ssssssssssss_ | 0.00 0.00 0.00 0.00 0.00 0.00 |
| 28. Tax refunds owed to you ✓ No ✓ Yes. Give specific information about them, including your already filed the and the tax years. 29. Family support Examples: Past due or lum, ✓ No ✓ Yes. Give specific information. | nation ing whether he returns state: Local: Local: Alimony: Maintenance: Support: Divorce settlement. Property settlement: Owes you disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation benefits; unpaid loans you made to someone else | ssssssssssss_ | 0.00 0.00 0.00 0.00 0.00 0.00 |
| 28. Tax refunds owed to you No Yes. Give specific information about them, including your already filed the and the tax years. 29. Family support Examples: Past due or luming No Yes. Give specific informations 30. Other amounts someone Examples: Unpaid wages, or Social Security | nation ing whether he returns state: Local: Local: Alimony: Maintenance: Support: Divorce settlement. Property settlement: Owes you disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation benefits; unpaid loans you made to someone else | ssssssssssss_ | 0.00 0.00 0.00 0.00 0.00 0.00 |

Entered 08/24/18 08:54:51 Desc Main Case 18-23900 Doc 1 Filed 08/24/18 Page 18 of 54 Document Lakena Debtor 1 Case number (if known)_ First Name Middle Name 31. Interests in insurance policies Examples: Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance ☑ No Yes. Name the insurance company Company name: Beneficiary: Surrender or refund value: of each policy and list its value... 0.00 0.00 0.00 32. Any interest in property that is due you from someone who has died If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to receive property because someone has died. ZI No Yes. Give specific information..... 0.00 33. Claims against third parties, whether or not you have filed a lawsuit or made a demand for payment Examples: Accidents, employment disputes, insurance claims, or rights to sue Z No ☐ Yes. Describe each claim..... 0.00 34. Other contingent and unliquidated claims of every nature, including counterclaims of the debtor and rights to set off claims 2 No ☐ Yes. Describe each claim. 0.00 35. Any financial assets you did not already list Z No ☐ Yes. Give specific information..... 0.00 36. Add the dollar value of all of your entries from Part 4, including any entries for pages you have attached 0.00 for Part 4. Write that number here Part 5: Describe Any Business-Related Property You Own or Have an Interest In. List any real estate in Part 1. 37. Do you own or have any legal or equitable interest in any business-related property? No. Go to Part 6. Yes. Go to line 38. Current value of the portion you own? Do not deduct secured claims 38. Accounts receivable or commissions you already earned

☐ No

☐ No

☐ Yes. Describe......

Yes. Describe......

39. Office equipment, furnishings, and supplies

Examples: Business-related computers, software, modems, printers, copiers, fax machines, rugs, telephones, desks, chairs, electronic devices

Case 18-23900 Doc 1 Filed 08/24/18 Entered 08/24/18 08:54:51 Desc Main Page 19 of 54 Document Lakena Debtor 1 Case number (if known)_ First Name 40 Machinery, fixtures, equipment, supplies you use in business, and tools of your trade Yes. Describe...... 41. Inventory ☐ No Yes. Describe...... 42. Interests in partnerships or joint ventures ☐ No Yes. Describe...... Name of entity: % of ownership 43. Customer lists, mailing lists, or other compilations O No ☐ Yes. Do your lists include personally identifiable information (as defined in 11 U.S.C. § 101(41A))? Yes. Describe...... 44 Any business-related property you did not already list ☐ No Yes. Give specific information 45. Add the dollar value of all of your entries from Part 5, including any entries for pages you have attached 0.00 for Part 5. Write that number here Part 6: Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest In. If you own or have an interest in farmland, list it in Part 1. 46 Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property? Mo. Go to Part 7. Yes. Go to line 47. Current value of the portion you own? Do not deduct secured claims or exemptions.

Official Form 106A/B

☐ Yes.....

47. Farm animals

☐ No

Examples: Livestock, poultry, farm-raised fish

Case 18-23900 Doc 1 Filed 08/24/18 Entered 08/24/18 08:54:51 Page 20 of 54 Document Lakena Debtor 1 Case number (if known) First Name 48. Crops-either growing or harvested ☐ No Yes. Give specific information..... 49. Farm and fishing equipment, implements, machinery, fixtures, and tools of trade ☐ No Yes..... 50. Farm and fishing supplies, chemicals, and feed No. ☐ Yes..... 51. Any farm- and commercial fishing-related property you did not already list ☐ No Yes. Give specific information..... 52. Add the dollar value of all of your entries from Part 6, including any entries for pages you have attached 0.00 for Part 6. Write that number here Part 7: Describe All Property You Own or Have an Interest in That You Did Not List Above 53. Do you have other property of any kind you did not already list? Examples: Season tickets, country club membership ZI No ☐ Yes. Give specific information..... 0.00 54 Add the dollar value of all of your entries from Part 7. Write that number here Part 8: List the Totals of Each Part of this Form 0.00 55 Part 1: Total real estate, line 2 0.00 56. Part 2: Total vehicles, line 5 600.00 57. Part 3: Total personal and household items, line 15 88.00 58. Part 4: Total financial assets, line 36 0.00 59. Part 5: Total business-related property, line 45 0.00 60. Part 6: Total farm- and fishing-related property, line 52 0.00 61. Part 7: Total other property not listed, line 54

63. Total of all property on Schedule A/B. Add line 55 + line 62.

62. Total personal property. Add lines 56 through 61.

688.00

Copy personal property total ->

688.00

688.00

Case 18-23900 Doc 1 Filed 08/24/18 Entered 08/24/18 08:54:51 Desc Main Page 21 of 54 Document

| Debtor 1 | Lakena | D. | Staples |
|---------------------|----------------------|-------------------------------|-----------|
| 505.0 | First Name | Middle Name | Last Name |
| Debtor 2 | | | |
| (Spouse, if filing) | First Name | Middle Name | Last Name |
| United States F | Bankruptov Court for | the: Northern District of III | linois |
| Office Office L | Sankruptcy Count for | ale, Horascini Diodici oi ili | intioid |
| Case number | | | |
| (If known) | | | |

Official Form 1060

Schedule C: The Property You Claim as Exempt

04/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on Schedule A/B: Property (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of Part 2: Additional Page as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds-may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

| 1. | You are cla | xemptions are you claiming? iming state and federal nonban iming federal exemptions. 11 U | kruptcy exemptions. 11 | , , | |
|----|---|---|--------------------------------------|---|------------------------------------|
| 2. | For any proper | ty you list on Schedule A/B t | hat you claim as exem | pt, fill in the information below. | |
| | | on of the property and line on that lists this property | Current value of the portion you own | Amount of the exemption you claim | Specific laws that allow exemption |
| | | | Copy the value from Schedule A/B | Check only one box for each exemption. | |
| | Brief description: Line from Schedule A/B: | Household Furniture | \$ 300.00 | \$ \$ 100% of fair market value, up to any applicable statutory limit | 735-5/12-1001 |
| | Brief description: Line from Schedule A/B: | Electronics | \$200.00 | \$ \$ 100% of fair market value, up to any applicable statutory limit | 735-5/12-1001 |
| | Brief description: Line from Schedule A/B: | Everyday Clothes | \$ <u>100.00</u> | \$ \$ 100% of fair market value, up to any applicable statutory limit | 735-5/12-1001 |

Official Form 106C

☐ No Yes

Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case?

Document

Case 18-23900 Doc 1 Filed 08/24/18 Entered 08/24/18 08:54:51 Desc Main Page 22 of 54

Debtor 1

Lakena First Name Middle Name

Staples

Case number (if known)___

Part 2:

Additional Page

| | on of the property and line /B that lists this property | Current value of the portion you own | Amount of the exemption you claim | Specific laws that allow exemption |
|----------------------------|--|--------------------------------------|--|------------------------------------|
| | | Copy the value from Schedule A/B | Check only one box for each exemption | |
| Brief description: | Weekly Earnings | \$3,152.00 | \$s | 735-5/12-803 |
| Line from Schedule A/B: | MA | | any applicable statutory limit | |
| Brief description: | Chase bank accts | \$3,152.00 | 3 \$ | 735-5/12-803 |
| Line from Schedule A/B: | | | 100% of fair market value, up to any applicable statutory limit | |
| Brief description: | | \$ | Q \$ | |
| Line from Schedule A/B: | | | ☐ 100% of fair market value, up to any applicable statutory limit | |
| Brief description: | | \$ | <u> </u> | |
| Line from Schedule A/B: | | | ☐ 100% of fair market value, up to any applicable statutory limit | |
| Brief description: | A-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1 | \$ | □ \$ □ 100% of fair market value, up to | |
| Line from Schedule A/B: | Management and a second | | any applicable statutory limit | |
| Brief description: | | \$ | □ \$ | |
| Line from Schedule A/B: | Washington Washington | | ☐ 100% of fair market value, up to any applicable statutory limit | |
| Brief description: | | \$ | S | |
| Line from Schedule A/B: | | | ☐ 100% of fair market value, up to any applicable statutory limit | |
| Brief description: | | \$ | □ \$ 100% of fair market value, up to | |
| Line from Schedule A/B: | | | any applicable statutory limit | |
| Brief description: | | \$ | □ \$ | |
| Line from Schedule A/B: | | | ☐ 100% of fair market value, up to any applicable statutory limit | |
| Brief description: | | \$ | S | |
| Line from Schedule A/B: | | | ☐ 100% of fair market value, up to any applicable statutory limit | |
| Brief description: | | \$ | \$\$ 100% of fair market value, up to | |
| Line from Schedule A/B: | | | any applicable statutory limit | |
| Brief description: | | \$ | <u> </u> | |
| Line from Schedule A/B: | *AND AND AND AND AND AND AND AND AND AND | | ☐ 100% of fair market value, up to any applicable statutory limit | |

Case 18-23900 Doc 1 Filed 08/24/18 Entered 08/24/18 08:54:51 Desc Main Document Page 23 of 54

| Fill in this information to identify your ca | Se: | | | |
|--|--|--|---|--|
| Debtor 1 Lakena | Staples | | | |
| First Name Middle | F | | | |
| Debtor 2 (Spouse, if filing) First Name Middle | Name Last Name | | | |
| | CONTRACTOR | | | |
| United States Bankruptcy Court for the: Northern | District of Illinois | | | • |
| Case number (If known) | | | Chook | if this is an |
| | | | | ed filing |
| | | | | |
| Official Form 106D | | | | |
| Schedule D: Creditor | s Who Have Claims Secur | ed by Prop | erty | 12/15 |
| Be as complete and accurate as possible information. If more space is needed, cop | . If two married people are filing together, both are ed by the Additional Page, fill it out, number the entries, | ually responsible f | or supplying correct | t fany |
| additional pages, write your name and ca | se number (if known). | | ionii. On the top of | any |
| A Danier and disease have a defined as a little and the same and the s | | | | |
| 1. Do any creditors have claims secured i | | | | |
| Yes. Fill in all of the information below | m to the court with your other schedules. You have noth | ng else to report on | this form. | |
| Tes. Fill all of the information below | | | | |
| Parts B List All Secured Claims | | | | |
| 2.3. Air occured olams | | | | |
| 2. List all secured claims. If a creditor has r | more than one secured claim, list the creditor separately | Column A Amount of claim | Column B Value of collateral | Column C |
| for each claim. If more than one creditor I | has a particular claim, list the other creditors in Part 2. | Do not deduct the | that supports this | Unsecured portion |
| As much as possible, list the claims in aip | habetical order according to the creditor's name. | value of collateral. | claim | If any |
| 2.1 | Describe the property that secures the claim: | \$ | • | \$ |
| Creditor's Name | | - | . Ψ | Ψ |
| | | | | |
| Number Street | | ļ | | |
| | As of the date you file, the claim is: Check all that apply. | | | |
| | ☐ Unliquidated | | | |
| City State ZIP Code | Disputed | | | |
| Who owes the debt? Check one. | | | | |
| Debtor 1 only | Nature of lien. Check all that apply. | | | |
| Debtor 2 only | An agreement you made (such as mortgage or secured car loan) | | | |
| Debtor 1 and Debtor 2 only | Statutory lien (such as tax lien, mechanic's lien) | | | |
| At least one of the debtors and another | Judgment lien from a lawsuit | | | |
| ☐ Check if this claim relates to a | Other (including a right to offset) | = | | |
| community debt | | | | |
| Date debt was incurred | Last 4 digits of account number | NA my rephress on a gray recovery and more of the contract of | | |
| 2.2 | Describe the property that secures the claim: | \$ | \$ | \$ |
| Creditor's Name | |] | | |
| Number Street | - : | | | |
| Harrison Sacce | As of the date you file, the claim is: Check all that apply. | - | | |
| | Contingent | | | |
| | ☐ Unliquidated | | | |
| City State ZIP Code | Disputed | | | |
| Who owes the debt? Check one. | Nature of lien. Check all that apply. | | | |
| Debtor 1 only | An agreement you made (such as mortgage or secured | | | |
| Debtor 2 only | car loan) | | | |
| Debtor 1 and Debtor 2 only | Statutory lien (such as tax lien, mechanic's lien) | | | |
| At least one of the debtors and another | Judgment lien from a lawsuit | | | |
| Check if this claim relates to a | Other (including a right to offset) | | | |
| community debt | | | | |
| Date debt was incurred | Last 4 digits of account number | Substitution to the expression of the contraction o | ar ar a mar a sa mar an ar an ar an | makada atta makapikan dan perjaka paga yan sasara sa |
| Add the dollar value of your entries in | Column A on this page. Write that number here: | \$ | | |

Case 18-23900 Doc 1 Filed 08/24/18 Entered 08/24/18 08:54:51 Desc Main Document Page 24 of 54

| Debtor 1 | L <u>akena</u> | Staples Case nui | mber (if known) | | |
|---|---|---|--|---|--|
| | First Name Middle Name | Last Name | *************************************** | | |
| Part 1: | Additional Page After listing any entries on this p by 2.4, and so forth. | age, number them beginning with 2.3, followed | Column A Amount of claim Do not deduct the value of collateral. | Column B Value of collateral that supports this claim | Column C Unsecured portion If any |
| | | Describe the property that secures the claim: | \$ | \$ | \$ |
| Creditor | 's Name | | ••• | The Mark and a decidate at the second | * |
| Number | Street | | | | |
| Multipel | Saeei | : | | | |
| | | As of the date you file, the claim is: Check all that apply | | | |
| *************************************** | | Contingent | | | |
| City | State ZIP Code | ☐ Unliquidated ☐ Disputed | | | |
| Who ow | es the debt? Check one. | Nature of lien. Check all that apply. | | | |
| Debt | or 1 only | An agreement you made (such as mortgage or secured | | | |
| | or 2 only | car loan) | | | |
| | or 1 and Debtor 2 only | Statutory lien (such as tax lien, mechanic's lien) | | | |
| At lea | ast one of the debtors and another | Judgment lien from a lawsuit Other (including a right to offset) | | | |
| | ck if this claim relates to a munity debt | Other (including a right to offset) | _ | | |
| | bt was incurred | Last 4 digits of account number | | | |
| | то по под то по по по по по под постоя и по по по по по по по под под постоя по под постоя по под под под под | | formativities were provided and a second control of the second con | en enemente que sea se estando a social esta esta esta esta esta esta esta esta | edelization de la company de l |
| Creditor | 's Name | Describe the property that secures the claim: | \$ | \$ | \$ |
| Number | Street | ı | | | |
| Number | Street | An of the data you file the alaim is Charled all that and | | | |
| | | As of the date you file, the claim is: Check all that apply Contingent | | | |
| | | ☐ Unliquidated | | | |
| City | State ZIP Code | ☐ Disputed | | | |
| Who ow | es the debt? Check one. | Nature of lien. Check all that apply. | | | |
| Debt | or 1 only | | | | |
| | or 2 only | An agreement you made (such as mortgage or secured car loan) | | | |
| Debt | or 1 and Debtor 2 only | Statutory lien (such as tax lien, mechanic's lien) | | | |
| At lea | ast one of the debtors and another | Judgment lien from a lawsuit | | | |
| | ck if this claim relates to a munity debt | Other (including a right to offset) | _ | | |
| | bt was incurred | Last 4 digits of account number | | | |
| — | | MAN TO AND | and the state of t | t dad en 1501 hat gen hij skilestillet dan Sentau tamblensk bandpatilise bad komm | arta recoda accesar esta mario, escendo en |
| Creditor | 's Name | Describe the property that secures the claim: | \$ | \$ | \$ |
| 4.4-114 | | | | | |
| Number | Street | | | | |
| | | | | | |
| | | As of the date you file, the claim is: Check all that apply | | | |
| - | | ☐ Contingent | | | |
| City | State ZIP Code | Unliquidated Disputed | | | |
| Who ow | es the debt? Check one. | Nature of lien. Check all that apply. | | | |
| Debt | or 1 only | An agreement you made (such as mortgage or secured | | | |
| Debt | or 2 only | car loan) | | | |
| Marin. | or 1 and Debtor 2 only | Statutory lien (such as tax lien, mechanic's lien) | | | |
| L. At lea | ast one of the debtors and another | Judgment lien from a lawsuit Other (including a right to offset) | | | |
| | ck if this claim relates to a munity debt | Other (including a right to onset) | _ | | |
| | bt was incurred | Last 4 digits of account number | | | |
| . A | dd the dollar value of your entries | in Column A on this page. Write that number here: | | | |
| | | add the dollar value totals from all pages. | 4 | i | |
| | rite that number here: | women there were in the un payer. | \$ | | |

Case 18-23900 Doc 1 Filed 08/24/18 Entered 08/24/18 08:54:51 Desc Main

Case number (if known)

Page 25 of 54 Document

Staples

List Others to Be Notified for a Debt That You Already Listed Part 21 Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page. On which line in Part 1 did you enter the creditor? Name Last 4 digits of account number ____ ___ Number Street City State ZIP Code On which line in Part 1 did you enter the creditor? ____ Name Last 4 digits of account number _____ Number Street City State ZIP Code On which line in Part 1 did you enter the creditor? Name Last 4 digits of account number ____ ___ Number Street City State ZIP Code On which line in Part 1 did you enter the creditor? __ Name Last 4 digits of account number Number Street City State ZIP Code On which line in Part 1 did you enter the creditor? ____ Last 4 digits of account number ____ ___ Name Number Street City State ZIP Code On which line in Part 1 did you enter the creditor? _ Name Last 4 digits of account number ___ ___ Number Street City State ZIP Code

Lakena

Debtor 1

Filed 08/24/18 Case 18-23900 Doc 1 Entered 08/24/18 08:54:51 Desc Main Document Page 26 of 54 Fill in this information to identify your case: n Lakena Staples Debtor 1 First Name vliddle Name Last Name Debtor 2 (Spouse, if filing) First Name Middle Name Last Name United States Bankruptcy Court for the: Northern District of Illinois Check if this is an Case number amended filing Official Form 106E/F Schedule E/F: Creditors Who Have Unsecured Claims 12/15 Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on Schedule A/B: Property (Official Form 106A/B) and on Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G). Do not include any creditors with partially secured claims that are listed in Schedule D: Creditors Who Have Claims Secured by Property. If more space is needed, copy the Part you need, fill it out, number the entries in the boxes on the left. Attach the Continuation Page to this page. On the top of any additional pages, write your name and case number (if known). **List All of Your PRIORITY Unsecured Claims** Part 1: 1. Do any creditors have priority unsecured claims against you? No. Go to Part 2. Tyes. 2. List all of your priority unsecured claims. If a creditor has more than one priority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. If a claim has both priority and nonpriority amounts, list that claim here and show both priority and nonpriority amounts. As much as possible, list the claims in alphabetical order according to the creditor's name. If you have more than two priority unsecured claims, fill out the Continuation Page of Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. (For an explanation of each type of claim, see the instructions for this form in the instruction booklet.) Priority Total claim Nonpriority amount amount Last 4 digits of account number Priority Creditor's Name When was the debt incurred? Number Street As of the date you file, the claim is: Check all that apply Contingent ZIP Code Unliquidated Who incurred the debt? Check one. ☐ Disputed Debtor 1 only Debtor 2 only Type of PRIORITY unsecured claim: Debtor 1 and Debtor 2 only ☐ Domestic support obligations At least one of the debtors and another Taxes and certain other debts you owe the government Check if this claim is for a community debt Claims for death or personal injury while you were intoxicated Is the claim subject to offset? Other, Specify ON D Yes 2.2 Last 4 digits of account number Priority Creditor's Name When was the debt incurred? Number As of the date you file, the claim is: Check all that apply Contingent ☐ Unliquidated ZIP Code Who incurred the debt? Check one Disputed Debtor 1 only Type of PRIORITY unsecured claim: Debtor 2 only Domestic support obligations Debtor 1 and Debtor 2 only Taxes and certain other debts you owe the government At least one of the debtors and another Claims for death or personal injury while you were Check if this claim is for a community debt intoxicated Is the claim subject to offset? Other, Specify_

No Yes

Case 18-23900 Doc 1 Filed 08/24/18 Entered 08/24/18 08:54:51 Desc Main

Debtor 1

Docyment

Page 27 of 54
Case number (# known)_

Your PRIORITY Unsecured Claims - Continuation Page

| After listing any entries on this page, number then | n beginning with 2.3, followed by 2.4, and so forth. | Total claim | Priority amount | Nonpriority amount |
|--|--|--|--|--|
| Priority Creditor's Name | Last 4 digits of account number | \$ | \$ | \$ |
| Priority Creditor's Name | When was the debt incurred? | | | |
| Number Street | The state of the s | | | |
| Professional Management of the Control of the Contr | As of the date you file, the claim is: Check all that apply. | | | |
| 400000000000000000000000000000000000000 | Contingent | | | |
| City State ZIP Code | ☐ Unliquidated ☐ Disputed | | | |
| Who incurred the debt? Check one. | ☐ Disputed | | | |
| Debtor 1 only | Type of PRIORITY unsecured claim: | | | |
| Debtor 2 only | Domestic support obligations | | | |
| ☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another | ☐ Taxes and certain other debts you owe the government | | | |
| | Claims for death or personal injury while you were intoxicated | | | |
| ☐ Check if this claim is for a community debt | Other. Specify | | | |
| Is the claim subject to offset? | | | | |
| ☐ No | | | | |
| Yes | | | | |
| The Charles of the Artificial Charles of the | | kontoniari daare il poteniari, neggerari, arantasi | en e | Photos Billion of starts stable to a c |
| Priority Creditor's Name | Last 4 digits of account number | \$ | \$ | \$ |
| Thomas Addition | When was the debt incurred? | | | |
| Number Street | Tallett was the dept incurred? | | | |
| | As of the date you file, the claim is: Check all that apply. | | | |
| | ☐ Contingent | | | |
| City State ZIP Code | Unliquidated | | | |
| Who incurred the debt? Check one. | ☐ Disputed | | | |
| Debtor 1 only | Type of PRIORITY unsecured claim: | | | |
| Debtor 2 only | Domestic support obligations | | | |
| Debtor 1 and Debtor 2 only | Taxes and certain other debts you owe the government | | | |
| At least one of the debtors and another | Claims for death or personal injury while you were | | | |
| Check if this claim is for a community debt | intoxicated Other. Specify | | | |
| Is the claim subject to offset? | - Other, opening | | | |
| No | | | | |
| Yes | | | | |
| The second secon | eterlangskild folkskrive, og hede for en blitte i delter lindsen frendsjere underensenere i pjert yr til deltskeddelstangstrette lindskrive, senere en skipsyngenes på på e | | and the second section of the second section of the second section of the second section of the second section | s were wrongen a source of the contract of the |
| Priority Creditor's Name | Last 4 digits of account number | \$ | _ \$ | \$ |
| | When was the debt incurred? | | | |
| Number Street | The second secon | | | |
| The second secon | As of the date you file, the claim is: Check all that apply. | | | |
| | Contingent | | | |
| City State ZIP Code | Unliquidated | | | |
| Who incurred the debt? Check one. | ☐ Disputed | | | |
| Debtor 1 only | Type of PRIORITY unsecured claim: | | | |
| Debtor 2 only | Domestic support obligations | | | |
| Debtor 1 and Debtor 2 onlyAt least one of the debtors and another | Taxes and certain other debts you owe the government | | | |
| | Claims for death or personal injury while you were | | | |
| Check if this claim is for a community debt | intoxicated Other, Specify | od att to do call to select to decree progress pr | | kottaett etilise saktuutsiaan sootjuntjaajoogi jusaa, s |
| Is the claim subject to offset? | | | | |
| □ No | | | | |
| Yes | | | | |

Case 18-23900 Doc 1 Filed 08/24/18 Entered 08/24/18 08:54:51 Desc Main

Debtor 1 Lakena D. Document Page 28 of 54

First Name Middle Name Last Name

Last Name Last Name Last Name

| | FIFS |
|--------------|------|
| | |
| VAROS NASANS | |

List All of Your NONPRIORITY Unsecured Claims

3. Do any creditors have nonpriority unsecured claims against you?

| | No. You have nothing to report in the Yes | is part. Su | bmit this form to | the court with your other schedules. | | |
|-----|--|--|--|--|-----------------------------|--|
| i | nonpriority unsecured claim, list the cred | ditor separ ditor holds | ately for each cla | al order of the creditor who holds each claim. If a creditor has aim. For each claim listed, identify what type of claim it is. Do not n, list the other creditors in Part 3.If you have more than three no | list da | ims already |
| 4.1 | 0 514 | | | | Tota | al claim |
| | Credit Acceptance Nonpriority Creditor's Name | | | Last 4 digits of account number | ø | 9.956.00 |
| | PO Box 551888 | | | When was the debt incurred? | \$ | |
| | Number Street | | | | | |
| | Detroit | МІ | 48255 | | | |
| | City | State | ZIP Code | As of the date you file, the claim is: Check all that apply. | | |
| | | | | ☑ Contingent | | |
| | Who incurred the debt? Check one. | | | Unliquidated | | |
| | Debtor 1 only | | | Disputed | | |
| | Debtor 2 only | | | | | |
| | Debtor 1 and Debtor 2 only | | | Type of NONPRIORITY unsecured claim: | | |
| | At least one of the debtors and another | | | Student loans | | |
| | Check if this claim is for a commun | nity debt | | Obligations arising out of a separation agreement or divorce that you did not report as priority claims | | |
| | Is the claim subject to offset? | | | Debts to pension or profit-sharing plans, and other similar debts | ; | |
| | ☑ No | | | Other Specify Auto Loan | | |
| | Yes | | | | | |
| 4.2 | Chicago Tinongo Conto | ************************************** | hlumlus lacumor obrocars circis III et escibs Aubiside a e | THE PROPERTY OF THE PROPERTY O | Mary and Miller Special Co. | 14,959.00 |
| | Chicago Finance Center Nonpriority Creditor's Name | | | Last 4 digits of account number | \$ | 14,909.00 |
| | · - | | | When was the debt incurred? | | |
| | 3538 West Irving Park Road Number Street | | | | | |
| | Chicago | IL | 60618 | As of the date you file, the claim is: Check all that apply. | | |
| | City | State | ZIP Code | | | |
| | 187 | | | | | |
| | Who incurred the debt? Check one. | | | Disputed | | |
| | Debtor 1 only | | | Sisputed | | |
| | Debtor 2 only Debtor 1 and Debtor 2 only | | | Type of NONPRIORITY unsecured claim: | | |
| | At least one of the debtors and another | | | ☐ Student loans | | |
| | At least one of the debtors and another | | | Obligations arising out of a separation agreement or divorce | | |
| | ☐ Check if this claim is for a commun | nity debt | | that you did not report as priority claims | | |
| | Is the claim subject to offset? | | | Debts to pension or profit-sharing plans, and other similar debts | | |
| | ☑ No | | | Other. Specify Voluntary Repo/ Car Accident | | |
| | Yes | | | | | |
| 4.3 | Control of the contro | timentari addigilar bilganiyadgi pendirey. | things to be a second of the second of the second s | 中国的主义的主义,但是是不是是一个人,我们就是一个人,我们就是一个人,我们就是一个人,我们就是一个人,我们就是一个人,我们就是一个人,我们就是一个人,我们就是 第一个人,我们就是一个人,我们就是一个人,我们就是一个人,我们就是一个人,我们就是一个人,我们就是一个人,我们就是一个人,我们就是一个人,我们就是一个人,我们就 | IDIAL-CHARGE CONTINUE | organistic organistic organization of the section o |
| ļ., | Capital One | | | Last 4 digits of account number | ^ | 500.00 |
| | Nonpriority Creditor's Name | | | When was the debt incurred? | э | |
| | PO Box 30281 Number Street | | | <u> </u> | | |
| | Salt Lake City | UT | 84130 | | | |
| | City | State | ZIP Code | As of the date you file, the claim is: Check all that apply. | | |
| | | | | Contingent | | |
| | Who incurred the debt? Check one. | | | Unliquidated | | |
| | Debtor 1 only | | | ☐ Disputed | | |
| | Debtor 2 only | | | | | |
| | Debtor 1 and Debtor 2 onlyAt least one of the debtors and another | | | Type of NONPRIORITY unsecured claim: | | |
| | At least one of the deptors and another | | | ☐ Student loans | | |
| | ☐ Check if this claim is for a commun | nity debt | | Obligations arising out of a separation agreement or divorce | | |
| | Is the claim subject to offset? | | | that you did not report as priority claims | | |
| | ☑ No | | | Debts to pension or profit-sharing plans, and other similar debts | | |
| | Yes | | | Other. Specify <u>Credit Card</u> | | |
| | | | | | | |

Middle Name

Case 18-23900 Doc 1 Filed 08/24/18 Entered 08/24/18 08:54:51 Desc Main

Debtor 1

Lakena First Name

Document

Page 29 of 54 Case number (if known)_

Part 2:

Your NONPRIORITY Unsecured Claims — Continuation Page

| listing any entries on this pag | ge, number them be | eginning with 4.4, f | 4.4, followed by 4.5, and so forth. | | | |
|--|---|--|---|--|---------------------|--|
| Peoples Gas Nonpriority Creditor's Name | | | Last 4 digits of account number | \$ | 200 | |
| 200 East Randolph | | | When was the debt incurred? | | | |
| Number Street Chicago | IL (| 60601 | As of the date you file, the claim is: Check all that apply. | | | |
| City | | | ☑ Contingent | | | |
| | | | Unliquidated | | | |
| Who incurred the debt? Check or —. | ne. | | ☐ Disputed | | | |
| Debtor 1 only | | | | | | |
| Debtor 2 only | | | Type of NONPRIORITY unsecured claim: | | | |
| Debtor 1 and Debtor 2 only | | | Student loans | | | |
| At least one of the debtors and a | nother | | Obligations arising out of a separation agreement or divorce that | | | |
| Check if this claim is for a co | ommunity debt | | you did not report as priority claims | | | |
| | | | Debts to pension or profit-sharing plans, and other similar debts | | | |
| Is the claim subject to offset? | | | Other. Specify Utility Bill | | | |
| ☑ No ☑ Yes | | | | | | |
| and the second s | nn feil fein der fein der der Angeleichen der Gebeuter der Gebeuter der Feiler der Gebeuter der Angeleiche Geb | rhe VII. a 15 m 15 fe Blantiaan y yn die fel Adysglyn eg yng ywy a grwysgor a ar f yn in wei | Last 4 digits of account number | ************************************** | Localita e Servia | |
| Nonpriority Creditor's Name | | | When was the debt incurred? | | | |
| Number Street | | THE TOTAL TOLD TOLD TOLD TOLD TOLD TOLD TOLD TOL | As of the date you file, the claim is: Check all that apply. | | | |
| City | State ZII | P Code | ☐ Contingent | | | |
| | | | Unliquidated | | | |
| Who incurred the debt? Check on | ie. | | Disputed | | | |
| Debtor 1 only | | | • | | | |
| Debtor 2 only | | | Type of NONPRIORITY unsecured claim: | | | |
| Debtor 1 and Debtor 2 only | | | Student loans | | | |
| At least one of the debtors and ar | nother | | Obligations arising out of a separation agreement or divorce that | | | |
| Check if this claim is for a co | mmunity dobt | | you did not report as priority claims | | | |
| | amunity uebi | | Debts to pension or profit-sharing plans, and other similar debts | | | |
| s the claim subject to offset? | | | Other. Specify | | | |
| □ No □ Yes | | | | | | |
| t i til er er i foreste en er timerkin, som etne ettere ettiden melene vidigkl | Hartschopenstattidet (die 1988a), bei Start (die 1981), bei Start (die 1988), bei Start | | Last 4 digits of account number | \$ | er e-pess , 1-1,11, | |
| Nonpriority Creditor's Name | | 1 | When was the debt incurred? | | | |
| Number Street | | j | As of the date you file, the claim is: Check all that apply. | | | |
| City | State ZIF | P Code | ☐ Contingent | | | |
| Affin in a super alab 11/0 of 1 | | | ☐ Unliquidated | | | |
| Who incurred the debt? Check on | e. | | ☐ Disputed | | | |
| Debtor 1 only | | | | | | |
| Debtor 2 only | | • | Type of NONPRIORITY unsecured claim: | | | |
| Debtor 1 and Debtor 2 only | N. | | Student loans | | | |
| At least one of the debtors and ar | notner | | Obligations arising out of a separation agreement or divorce that | | | |
| Check if this claim is for a co | mmunity debt | | you did not report as priority claims | | | |
| s the claim subject to offset? | - | † | Debts to pension or profit-sharing plans, and other similar debts | | | |
| | | | Other, Specify | | | |
| ☑ No | | | | | | |

Case 18-23900

Doc 1 Filed 08/24/18 Entered 08/24/18 08:54:51 Desc Main

Debtor 1

Lakena

Docympent

Page 30 of 54 Case number (if known)

Part 3:

List Others to Be Notified About a Debt That You Already Listed

| 5. Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or subm | |
|--|--|
|--|--|

| Sourc Name | e Recievables | | | On which entry in Part 1 or Part 2 did you list the original creditor? |
|---------------|--|--|--|---|
| PO Bo | ox 4068 | | | Line A.A. of (Charleson) [7] mark on the |
| Number | Street | | | Line <u>4.4</u> of (<i>Check one</i>): Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims |
| Green | isboro | NC | 27404 | Last 4 digits of account number |
| City | to the control of the states | State | ZIP Code | |
| Name | | | | On which entry in Part 1 or Part 2 did you list the original creditor? |
| | | | | Line of (Check one): Part 1: Creditors with Priority Unsecured Claims |
| Number | Street | | | Part 2: Creditors with Nonpriority Unsecured Claims |
| City | | State | ZIP Code | Last 4 digits of account number |
| Name | TO THE COLOR OF TH | titar i i reservita e e e e e e e e e e e e e e e e e e e | \$00.000 \$10,000 \$200 \$200 \$200 \$200 \$200 \$200 \$200 | On which entry in Part 1 or Part 2 did you list the original creditor? |
| Tablic . | | | | |
| Number | Street | | | Line of (Check one): Part 1: Creditors with Priority Unsecured Claims |
| | | | · · · · · · · · · · · · · · · · · · · | Part 2: Creditors with Nonpriority Unsecured Claims |
| City | - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 | State | ZIP Code | Last 4 digits of account number |
| Name | · | | | On which entry in Part 1 or Part 2 did you list the original creditor? |
| | | | | Line of (Check one): Part 1: Creditors with Priority Unsecured Claims |
| Number | Street | | | Part 2: Creditors with Nonpriority Unsecured |
| City | | State | ZIP Code | Last 4 digits of account number |
| Name | | and the second s | entra destinada se cuma en está a se lo misso | On which entry in Part 1 or Part 2 did you list the original creditor? |
| | | | | Line of (Check one): Part 1: Creditors with Priority Unsecured Claims |
| Number | Street | | | Claims Part 2: Creditors with Nonpriority Unsecured |
| City | en 21 stanta e 12 en 1832, kan era zona et albanetak este este este este este este este est | State | ZIP Code | Last 4 digits of account number |
| Name | | | | On which entry in Part 1 or Part 2 did you list the original creditor? |
| | | | | Line of (Check one): Part 1: Creditors with Priority Unsecured Claims |
| Number | Street | | | Part 2: Creditors with Nonpriority Unsecured |
| City | | State | ZIP Code | Last 4 digits of account number |
| Name | | | manner om sperifiere for filmente (samitate) prefer in 1944, verstende | On which entry in Part 1 or Part 2 did you list the original creditor? |
| Number | Street | | | Line of (Check one): Part 1: Creditors with Priority Unsecured Claims |
| | Succe | TIVITA - | | Claims Part 2: Creditors with Nonpriority Unsecured |
| City | | | | last 4 digits of account number |
| Ony | | State | ZIP Code | Last 4 digits of account number |

Case 18-23900

Doc 1 Filed 08/24/18 Entered 08/24/18 08:54:51 Desc Main Page 31 of 54
Case number (# known)

Debtor 1

Docyment

Part 4:

Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. § 159. Add the amounts for each type of unsecured claim.

| | | | | Total claim | |
|--------------|-----|---|-------------|-------------|-----------|
| Total claims | 6a | . Domestic support obligations | 6a. | \$ | 0.00 |
| from Part 1 | 6b | Taxes and certain other debts you owe the government | 6b. | \$ | 0.00 |
| | 6с | Claims for death or personal injury while you were intoxicated | 6c. | \$ | 0.00 |
| | 6d | Other. Add all other priority unsecured claims. Write that amount here. | 6d. | + \$ | 0.00 |
| | 6e | Total. Add lines 6a through 6d. | 6e. | \$ | 0.00 |
| | | | | Total claim | |
| Total claims | 6f. | Student loans | 6f. | \$ | 0.00 |
| from Part 2 | | Obligations arising out of a separation agreement or divorce that you did not report as priority claims | 6g. | \$ | 0.00 |
| | 6h. | Debts to pension or profit-sharing plans, and other similar debts | 6h. | \$ | 0.00 |
| | 6i. | Other. Add all other nonpriority unsecured claims. Write that amount here. | 6 i. | + \$ | 25,615.00 |
| | | | | | |

Case 18-23900 Doc 1 Filed 08/24/18 Entered 08/24/18 08:54:51 Desc Main Document Page 32 of 54

| Æ | ill in this ir | formation to iden | tify your case: | | | |
|-----|-------------------|---|--|--|--|--|
| D | ebtor | Lakena | D | Staples | | |
| | ebtor 2 | First Name | Middle Name | Last Name | _ | |
| 1 | Spouse If filing) | | Middle Name | Last Name | - | |
| | ase number | Bankruptcy Court for t | the: Distr | ict of | | |
| | f known) | | | 740-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1 | | Check if this is an |
| | | | | | ······································ | amended filing |
| 0 | fficial F | orm 106G | | | | |
| S | chedu | ıle G: Exc | ecutory Co | ontracts and U | nexpired Leases | 12/15 |
| add | Do you had No. Ci | ave any executory neck this box and fi fill in all of the infor | reded, copy the adding and case number of contracts or unexpile this form with the contraction below even if the company with well of company with well of company with well as or company with the company wi | r (if known). white discussion in the contracts of leases are listed the contracts or leases are listed them. | er, both are equally responsible for supply or the entries, and attach it to this page. On a contract of the entries of the en | the top of any |
| | unexpired | leases. | e, cell phone). See the hom you have the co | ie instructions for this form in ti | the instruction booklet for more examples of examples. | lease is for (for eccutory contracts and |
| 2.1 | | | | | | |
| | Name | | | | | |
| | Number | Street | | | | |
| | City | | State ZIP Code | | | |
| 2.2 | ŕ | • | | Better Bet such a community of the second | and the state of t | erak esik arasın azazırı azazı azazı azazı |
| | Name | | | | | |
| | Number | Street | | | | |
| | City | | Ct. 1- 710.0 | | | |
| 2.3 | Oity | | State ZIP Code | to the second second of the second | Martine and the second of the | |
| | Name | | | | | |
| | Number | Street | | | | |
| | City | TOTAL | State ZIP Code | | | |
| 2.4 | ,, | | State ZIF Code | Souther population and a south of the contract | | errod agranicosa economica, esperante en esperante en esperante en esperante en esperante en esperante en espe |
| | Name | | | 10-1 | | |
| | Number | Street | | | | |
| | City | | State 700 C. I | | | |
| 2.5 | Jity | | State ZIP Code | managama ay maraka sa | the wave to be the water and any comment of the property of the same | ta a company |
| | Name | | | | | |
| | Number | Street | | | | |
| | City | ······································ | State ZiP Code | | | |

Case 18-23900 Doc 1 Filed 08/24/18 Entered 08/24/18 08:54:51 Desc Main Document Page 33 of 54

Lakena D Staples Debtor 1 Case number (if known) Additional Page if You Have More Contracts or Leases Person or company with whom you have the contract or lease What the contract or lease is for 2.2 Name Number Street City State ZIP Code 2.__ Name Number Street City State ZIP Code 2_ Name Number Street City State ZIP Code 2.__ Name Number Street City State ZIP Code 2.__ Name Number Street City State ZIP Code 2._ Name Number Street City State ZIP Code 2._ Name Number Street City State ZIP Code Name Number Street City ZIP Code State

Case 18-23900 Doc 1 Filed 08/24/18 Entered 08/24/18 08:54:51 Desc Main Document Page 34 of 54

| Fill in this | information to ide | ntify your case: | | |
|--------------------------|---|--|---|---|
| Debtor 1 | Lakena | D, | Staples | |
| Debtor 2 | First Name | Middle Name | Last Name | |
| (Spouse, if fill | ng) First Name | Middle Name | Łast Name | |
| United State | es Bankruptcy Court for | the: Northern District of II | Ilinois | |
| Case numbi (If known) | er | | | |
| | | | | ☐ Check if this is an |
|)fficial | Form 106H | | | amended filing |
| | | | | |
| cned | lule H: Yo | ur Codebtoı | rs | 12/15 |
| nd number | are people or entitie gether, both are equ r the entries in the b er (if known). Answe | Oxes on the left Attack | or any debts you may have. pplying correct information the Additional Page to thi | Be as complete and accurate as possible. If two married people. If more space is needed, copy the Additional Page, fill it out, spage. On the top of any Additional Pages, write your name an |
| 1. Do you No | have any codebtors | s? (If you are filing a join | t case, do not list either spou | se as a codebtor.) |
| Yes | | | | |
| . Within t Arizona | the last 8 years, hav , California, Idaho, Lo | ve you lived in a commu ouisiana, Nevada, New N | unity property state or terri Mexico, Puerto Rico, Texas, N | ory? (Community property states and territories include |
| ☐ No. | Go to line 3. | | | |
| ☐ Yes | . Did your spouse, fo | rmer spouse, or legal eq | uivalent live with you at the ti | me? |
| | | mite atoto as touritane. | | |
| | res. III WIIIGH COMEN | unity state or territory did | you live? | Fill in the name and current address of that person. |
| | Name | | | |
| | Name of your spouse, form | ner spouse, or legal equivalent | | |
| | Number Street | | | ************************************** |
| | | | | |
| | City | State | ZIP Code | |
| Schedu | le D (Official Form 1 | codenior only it that pe | rson is a quarantor or cosi | otor if your spouse is filing with you. List the person oner. Make sure you have listed the creditor on edule G (Official Form 106G). Use Schedule D, |
| | 1: Your codebtor | | | Column 2: The creditor to whom you owe the debt |
| | | | | Check all schedules that apply: |
| 1 | | | | |
| Name | · · · · · · · · · · · · · · · · · · · | | | Schedule D, line |
| Number | Street | | | ☐ Schedule E/F, line |
| Ci. | | | | ☐ Schedule G, line |
| City | | State | ZIP Code | |
| Name | | | | Schedule D, line |
| | | | | ☐ Schedule E/F, line |
| Number | Street | | | ☐ Schedule G, line |
| City | | State | ZIP Code | |
| t | | | | |
| J | | | | |
| Name | | | | Schedule D, line |
| Name Number | Street | | | ☐ Schedule E/F, line |
| | Street | State | ZIP Code | |

Case 18-23900 Doc 1 Filed 08/24/18 Entered 08/24/18 08:54:51 Desc Main Document

Page 35 of 54

| Deb | tor 1 | Lakena First Name | [Middle Name |). Last Name | Staples | 3.5 | Case n | umber (# known) | |
|-------------|-------------|----------------------|---|-----------------|---------|---|-------------|--|----|
| | | Additional P | age to List N | More Codebtors | | | | | |
| | Colum | n 1: Your codek | otor | | | | C | Column 2: The creditor to whom you owe the de | bt |
| 3 | | | | | | | (| Check all schedules that apply: | |
| L | Name | | | | | | | Schedule D, line | |
| | | | | | | | | Schedule E/F, line | |
| | Number | Street | | <u></u> | | | | Schedule G, line | |
| - | City | | | State | | ZIP Code | | | |
| 3 | | | | | | | | _ | |
| | Name | | | | | | | Schedule D, line | |
| | | | | | | | | Schedule E/F, line | |
| | Number | Street | | | | | | ☐ Schedule G, line | |
| | City | | · · · · · · · · · · · · · · · · · · · | State | | ZIP Code | · . | | |
| 3 | ****** | | | | | | ſ | Cohadula D. III- | |
| | Name | | | | | | | Schedule D, line | |
| | Number | Street | | · mmaa.v. | | | | Schedule G, line | |
| | | | | | | | ` | _ concade o, line | |
| , | City | ···· | | State | | ZIP Code | | | |
| 3 | | | | | | | | | |
| | Name | | | | | ~ | | Schedule D, line | |
| | | ٠ | | | | | | Schedule E/F, line | |
| | Number | Street | | | | | [| Schedule G, line | |
| | City | | | State | | ZIP Code | | | |
| 3 | | | | | | | | | |
| | Name | | *************************************** | | | | | Schedule D, line | |
| | | | | | | | | Schedule E/F, line | |
| | Number | Street | | | | | | Schedule G, line | |
| | City | | | State | | ZIP Code | | | |
| 3 | | | | | | | | | |
| | Name | | | | | *************************************** | | A CONTRACTOR OF THE CONTRACTOR | |
| | h) conform | | | | | | | | |
| | Number | Street | | | | | | Schedule G, line | |
| | City | | | State | | ZIP Code | | | |
| 3 | TT | | · · · · · · · · · · · · · · · · · · · | | | | | Schedule D, line | |
| | Name | | | | | | | | |
| | Number | Street | | | | *************************************** | | Schedule G, line | |
| | | | | | | | _ | | |
| 3. | City | | | State | | ZIP Code | | | |
| لسنت | | | | | | | <u></u> | Cobodulo D. line | |
| | Name | | | | | | | Schedule D, line Schedule E/F, line | |
| - | | | | | | | _ | - Oviregale the Wild | |

Number

ZIP Code

State

☐ Schedule G, line _____

Case 18-23900 Doc 1 Filed 08/24/18 Entered 08/24/18 08:54:51 Desc Main Document Page 36 of 54

| Fill in this informati | ion to identify | your case: | | | | |
|--|-----------------------------------|---|--|----------------------|---------------------------------|---|
| Debtor 1 Laker | | D. | Staples | | | |
| Debtor 2 | | Middle Name | Last Name | | | |
| (Spouse, if filing) First Name | | Middle Name | Last Name | | | |
| İ | cy Court for the: | Northern District of Illinois | 3 | | | |
| Case number (If known) | | | = | | Check if | |
| <u> </u> | | | | | | mended filing postpetition chapter 13 |
| Official Form 10 | nei | | | | incor | me as of the following date: |
| | | | | | MM / | DD / YYYY |
| | | r Income | | | | 12/15 |
| If you are separated a separate sheet to this | and your spor | ise is not filing with you, top of any additional pa | do not include i | your spouse is i | iving with | otor 2), both are equally responsible for a you, include information about your spouse ouse. If more space is needed, attach a known). Answer every question. |
| Fill in your employ information. | /ment | | Dobtou 4 | | | _ |
| If you have more th | an one iob | | Debtor 1 | | hindacom entanas applicativos n | Debtor 2 or non-filing spouse |
| attach a separate p information about a employers. | age with | Employment status | ☑ Employed | | | Employed Not employed |
| Include part-time, so self-employed work | easonal, or | | | | | |
| Occupation may incorn homemaker, if it | lude student | Occupation | Housekeep | er | | |
| | | Employer's name | Marriot Hote | el | | |
| | | Employer's address | 208 South V | | | Number Street |
| | | | T | | | |
| | | | | | | |
| | | | Chicago City | IL State ZIP Co | 60603 | City State ZIP Code |
| | | How long employed the | re? | 2 00 | | City State ZIP Code |
| | | | ************************************** | <u></u> | | |
| | | Monthly Income | | | | |
| =, | no ocparated. | | | | | rite \$0 in the space. Include your non-filing |
| below. If you need m | nore space, att | ach a separate sheet to th | er, combine the infi ils form. | ormation for all e | mployers f | or that person on the lines |
| | | | | For D | ebtor 1 | For Debtor 2 or non-filing spouse |
| deductions). If not p | s wages, salar paid monthly, c | y, and commissions (be alculate what the monthly | fore all payroll wage would be. | ^{2.} \$_3,1 | 52.00 | \$ |
| 3. Estimate and list n | nonthly overti | me pay. | | 3. + \$ | 0.00 | + \$ |
| 4. Calculate gross in | come. Add line | e 2 + line 3. | | 4. \$_3,1 | 52.00 | \$ |

Case 18-23900 Doc 1 Filed 08/24/18 Entered 08/24/18 08:54:51 Desc Main Document Page 37 of 54

| Deb | tor 1 | Lakena First Name | Middle Name | D. Last Name | Staples | | c | Case number (# k | (nown)_ | | | | | |
|-----|-------|--|--|----------------------------------|---|-------------|-----------|-------------------|---------|-------------|----------------------|---|---------|----------|
| | | | | EGS Hand | | | Fo | or Debtor 1 | es . | For Deb | tor 2 or g spouse | | | |
| | Сор | y line 4 here | | | | → 4. | \$_ | 3,152.00 | | \$ | | _ | | |
| 5. | List | all payroll deduct | tions: | | | | | | | | | | | |
| | 5a. | Tax, Medicare, a | nd Social Secu | ritv deductio | ns | 5a. | \$ | 67.00 | | ¢ | | | | |
| | | Mandatory contr | | | | 5b. | Ψ \$ | 0.00 | - | | | | | |
| | | Voluntary contri | | | | 5c. | \$ | 0.00 | - | | | | | |
| | | Required repayn | | | | 5d. | \$_ \$ | 0.00 | - | | | | | |
| | | Insurance | | | | 5e. | \$ | 0.00 | • | | | | | |
| | 5f. | Domestic suppo | rt obligations | | | 5f. | \$ | 0.00 | • | | | | | |
| | 5g. | Union dues | | | | 5g. | \$ | 50.00 | • | \$ | | | | |
| | 5h. | Other deduction | s. Specify: | | | 5h. | +\$ | 0.00 | | + \$ | | | | |
| 6. | | | | | ic + 5d + 5e +5f + 5g + 5h | | \$_ | 117.00 | | s | | | | |
| 7. | Cal | culate total mont | hly take-home | pay. Subtract | line 6 from line 4. | 7. | \$_ | 3,035.00 | | \$ | | | | |
| 8. | List | all other income | regularly receiv | ved: | | | | | | | | | | |
| | 8a. | profession, or fa | rm | | perating a business, | | | | | | | | | |
| | | Attach a statemen receipts, ordinary monthly net incom | and necessary i | erty and busine ousiness expe | ess showing gross enses, and the total | 8a. | \$_ | 0.00 | | \$ | *** | | | |
| | 8b. | Interest and divid | dends | | | 8b. | \$ | 0.00 | | \$ | | | | |
| | 8c. | Family support pregularly receive | payments that y | ou, a non-fili | ng spouse, or a depend | ent | | | | | | | | |
| | | include alimony, s settlement, and pr | | | maintenance, divorce | 8c. | \$ | 0.00 | | \$ | | | | |
| | | Unemployment o | ompensation | | | 8d. | \$ | 0.00 | | \$ | | | | |
| | | Social Security | | | | 8e. | \$ | 0.00 | | \$ | | | | |
| | | that you receive, s Nutrition Assistant | stance and the value of the value of the standard standar | alue (if known |) of any non-cash assista under the Supplemental | | | 0.00 | | | | | | |
| | | Specify: | | | | 8f. | \$ | 0.00 | | \$ | | | | |
| | _ | Pension or retire | | | | 8g. | \$ | 0.00 | | \$ | | | | |
| | 8h. | Other monthly in | come. Specify: | | | 8h. | + \$ | 0.00 | | + \$ | | | | |
| 9. | Add | I all other income | . Add lines 8a + | 8b + 8c + 8d | + 8e + 8f +8g + 8h. | 9. | \$ | 0.00 | Ĺ | \$ | | | | |
| | | ulate monthly inc- the entries in line 1 | | | or non-filing spouse. | 10. | \$ | 3,035.00 | + | \$ | 0.00 | = | \$ | 3,035.00 |
| | | | | | ses that you list in Sche | | | | | | | | | |
| 1 | nend | ds or relatives. | | | nbers of your household, | | | | | | | | | |
| | | | | | 2-10 or amounts that are | | | to pay expen | ises | listed in S | | | • | 0.00 |
| 12. | ٩dd | the amount in the | a last column o | f line 10 to th | e amount in line 11. The | result | is the | combined mo | nthiy | income. | 11. | T | | 3,035.00 |
| | | | | | nd Liabilities and Certain S | | aı info | ormation, if it a | applie | ÷5 | 12. | | | bined |
| 13. | Ŋ | No. | rease or decrea | ase within the | year after you file this | form? | | ····· | | | | | | |
| | | Yes. Explain: | ##***** | *** | | | | | | | | | | |

Case 18-23900 Doc 1 Filed 08/24/18 Entered 08/24/18 08:54:51 Desc Main Document Page 38 of 54

| Fill in this info | rmation to identify | your case: | | | | |
|---|--|--|--|--|--|--|
| | akena | D. Staple | es Ch | neck if this is: | | |
| Debtor 2 | | Middle Name Last Nam | | | . | |
| (Spouse, if filing) | | Middle Name Last Nam | | An amended | | tpetition chapter 13 |
| | nkruptcy Court for the: I | Northern District of Illinois | | expenses as | of the followin | g date: |
| Case number(If known) | | | | MM / DD / YYY | Ϋ́ | |
| Official Fo | orm 106J | | | | | |
| Schedu | ile J: You | ır Expenses | | | | 12/15 |
| (if known). Ansv | and accurate as portore space is neede yer every question. | ssible. If two married people are d, attach another sheet to this for sehold | e filing together, both are e form. On the top of any add | equally respons ditional pages, | sible for supply write your nam | |
| 1. Is this a joint | ase? | | | | · · · · · · · · · · · · · · · · · · · | |
| ☑ No. Go to | | parate household? | | | | |
| O Ye | | Official Form 106J-2, Expenses fo | or Separate Household of De | ebtor 2. | | |
| 2. Do you have o | | □ No | | | | and the commence with a second control of the contr |
| Do not list Deb Debtor 2. | or 1 and | Yes. Fill out this information f each dependent | Dependent's relationship Debtor 1 or Debtor 2 | p to | Dependent's age | Does dependent live with you? |
| Do not state the names. | e dependents' | | Daughter | A. Marine view regarded and the day of the second s | 18 | □ No ☑ Yes |
| | | | Son | | 17 | □ No ☑ Yes |
| | | | Daughter | | 16 | ☐ No ☐ Yes |
| | | | Son | | 12 | ☐ No ☐ Yes |
| | | | Daughters | *************************************** | 4/3 | □ No |
| 3. Do your expen expenses of pe yourself and yo | ses include cople other than our dependents? | ☑ No □ Yes | | | | Yes |
| Part 2: Estin | ate Your Ongoin | Monthly Expenses | | | | |
| applicable date. | uate after the pank! | ankruptcy filing date unless you uptcy is filed. If this is a supple | mental Schedule J, check | supplement in the box at the | a Chapter 13 ca top of the form | ase to report and fill in the |
| such assistance | paid for with non-c and have included if | ash government assistance if y on Schedule I: Your Income (O | ou know the value of | | Your expen | coc |
| | ome ownership exp | penses for your residence. Inclu | | and 4. | .emarra o escriberaros accuraciones accuraciones. S | 1,100.00 |
| If not included | in line 4: | | | ٠, | | · · · · · · · · · · · · · · · · · · · |
| 4a. Real esta | te taxes | | | 4a. | \$ | 0.00 |
| 4b. Property, | homeowner's, or rent | er's insurance | | 4b. | \$ | 0.00 |
| | intenance, repair, and | | | 4c. | \$ | 0.00 |
| 4d. Homeowr | er's association or co | ondominium dues | | 4d. | \$ | 0.00 |

Case 18-23900 Doc 1 Filed 08/24/18 Entered 08/24/18 08:54:51 Desc Main Document Page 39 of 54

Debtor 1 Lakena D. Staples

First Name Middle Name Last Name

Case number (# known)

| | | | Your exp | penses |
|-----|---|------|----------|--------|
| 5 | Additional mortgage payments for your residence, such as home equity loans | 5. | \$ | 0.00 |
| 6 | Utilities: | | | |
| | 6a. Electricity, heat, natural gas | 6a. | œ | 250.00 |
| | 6b. Water, sewer, garbage collection | 6b. | \$ \$ | |
| | 6c. Telephone, cell phone, Internet, satellite, and cable services | 6c. | \$ \$ | |
| | 6d. Other. Specify: | 6d. | \$ \$ | 0.00 |
| 7. | | 7. | \$ | 400.00 |
| 8. | Childcare and children's education costs | 8. | \$ | |
| 9. | Clothing, laundry, and dry cleaning | 9. | \$ | |
| 10. | Personal care products and services | 10. | \$ | |
| 11, | Medical and dental expenses | 11. | \$\$ | 2.44 |
| 12. | Transportation. Include gas, maintenance, bus or train fare. | | Ψ | |
| | Do not include car payments. | 12. | \$ | 390.00 |
| 13. | Entertainment, clubs, recreation, newspapers, magazines, and books | 13. | \$ | 75.00 |
| 14. | Charitable contributions and religious donations | 14. | \$ | 100.00 |
| 15. | Insurance. | | | |
| | Do not include insurance deducted from your pay or included in lines 4 or 20. | | | |
| | 15a. Life insurance | 15a. | \$ | 50.00 |
| | 15b. Health insurance | 15b. | \$ | 0.00 |
| | 15c. Vehicle insurance | 15c. | \$ | 00.00 |
| | 15d. Other insurance. Specify: | 15d. | \$ | 0.00 |
| 16. | Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify: | 16. | \$ | 0.00 |
| 17. | Installment or lease payments: | 70. | 7 | |
| | 17a. Car payments for Vehicle 1 | 17- | \$ | 367.00 |
| | 17b. Car payments for Vehicle 2 | 17a, | | |
| | 17c. Other. Specify: | 17b. | \$ \$ | 0.00 |
| | 17d. Other. Specify: | 17c. | * | 0.00 |
| 10 | | 17d. | \$ | 0.00 |
| 18. | Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I). | 18, | \$ | 0.00 |
| 19. | Other payments you make to support others who do not live with you. | | Φ | 0.00 |
| | Specify: | 40 | • | 0.00 |
| | | 19. | \$ | 0.00 |
| | Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Incom | ie. | | |
| | 20a. Mortgages on other property | 20a. | \$ | |
| | 20b. Real estate taxes | 20b. | \$ | |
| | 20c. Property, homeowner's, or renter's insurance | 20c. | \$ | |
| | 20d. Maintenance, repair, and upkeep expenses | 20d. | \$ | |
| | 20e. Homeowner's association or condominium dues | 20e. | \$ | 0.00 |

Case 18-23900 Doc 1 Filed 08/24/18 Entered 08/24/18 08:54:51 Desc Main Document Page 40 of 54

| Debtor 1 | | Lakena First Name | Middle Name | D. Last Name | Staples | Case number (# | known) | # #7A47-#s L | |
|----------|--------|----------------------|--------------------------------------|--------------------|--|---------------------------|--------|--------------|----------|
| 21. | Oth | er. Specify: | | | | - | 21. | +\$ | 0.00 |
| 22. | Cald | culate your mon | thly expenses. | | | | | | |
| | 22a. | Add lines 4 thro | ugh 21. | | | | 22a. | · \$ | 3,747.00 |
| | 22b. | Copy line 22 (m | onthly expenses | for Debtor 2), if | any, from Official Form | 106J-2 | 22b. | : \$ | 0.00 |
| | 22c. | Add line 22a and | d 22b. The result | t is your monthly | expenses. | | 22c. | \$ | 3,747.00 |
| 23. | Calcu | ılate your monti | hly net income. | | | | | | |
| 2 | 23a. | Copy line 12 (ye | our combined mo | onthly income) fro | om Schedule I. | | 23a. | \$ | 3,035.00 |
| 2 | 23b. | Copy your mont | thly expenses fro | om line 22c abov | е. | | 23b. | -\$ | 3,747.00 |
| 2 | 23c. | | onthly expenses ur monthly net in | | nly income. | | 23c. | \$ | -712.00 |
| 24. | Do yo | ou expect an inc | rease or decre | ase in your expe | enses within the year a | ofter you file this form? | | | |
| | For ex | xample, do you e | expect to finish p | aying for your ca | r loan within the year or a modification to the ter | do you expect your | | | |
| (| ☑ No |). | | | | | | | |

Case 18-23900 Doc 1 Filed 08/24/18 Entered 08/24/18 08:54:51 Desc Main Document Page 41 of 54

| ebtor 1 | Lakena | D | Staples | | |
|--|--|--|--|---|--|
| ebtor 2 | First Name | Middle Name | Last Name | | |
| | ng) First Name | Middle Name | Last Name | | |
| | | or the: Northern District of | Illinois | | |
| e numbe nown) | er | | | | Check if this is a |
| | ······································ | | | ************************************** | amended filing |
| | E 40= | | | | |
| | Form 107 | _ | | | |
| aten | nent of Fi | nancial Affai | rs for Indivi | duals Filing for Banl | kruptcy 04 |
| s comp | olete and accurate | as possible. If two mar | ried people are filing t | together, both are equally responsible | e for supplying correct |
| mation iber (if k | i. It mote space is known). Answer ei | · neeαeα, aττach a separ very question. | ate sheet to this form | . On the top of any additional pages, | write your name and case |
| | | | | | |
| rt 1: | Give Details At | oout Your Marital Sta | itus and Where You | u Lived Before | |
| lithet ic | | | | | |
| vvnat is | s your current mar | ital status? | | | |
| Mar Mar | rried t married | | | | |
| 1400 | mameu | | | | |
| | | | | | |
| During | the last 3 years. h | ave you lived anywhere | other than where you | u live now? | |
| | the last 3 years, h | ave you lived anywhere | other than where you | u live now? | |
| Q No | | ave you lived anywhere | _ | | |
| No Yes | | | years. Do not include v | | Dates Debtor 2 |
| No Yes | s. List all of the plac | | years. Do not include v | where you live now. | Dates Debtor 2 lived there |
| No Yes | s. List all of the plac | | years. Do not include v Dates Debtor 1 lived there | where you live now. | |
| No Yes | s. List all of the plac | es you lived in the last 3 | years. Do not include v Dates Debtor 1 lived there | where you live now. Debtor 2: | lived there |
| No Yes | s. List all of the place | es you lived in the last 3 | years. Do not include v Dates Debtor 1 lived there | where you live now. Debtor 2: | lived there Same as Debtoo From |
| No Yes | s. List all of the place ebtor 1: 711 South Karlo | es you lived in the last 3 | Dates Debtor 1 lived there | where you live now. Debtor 2: Same as Debtor 1 | lived there |
| No Yes | s. List all of the place ebtor 1: 711 South Kark Number Street Chicago, | nes you lived in the last 3 | Dates Debtor 1 lived there | where you live now. Debtor 2: Same as Debtor 1 | lived there Same as Debto |
| No Yes | s. List all of the place ebtor 1: 711 South Kark Jumber Street | es you lived in the last 3 | Dates Debtor 1 lived there | where you live now. Debtor 2: Same as Debtor 1 | lived there Same as Debto From To |
| No Yes | s. List all of the place ebtor 1: 711 South Kark Number Street Chicago, | nes you lived in the last 3 | pears. Do not include volume by Dates Debtor 1 lived there From 06/01/2015 To 02/01/2018 | where you live now. Debtor 2: Same as Debtor 1 Number Street | lived there Same as Debto From To Code |
| No Yes | s. List all of the place ebtor 1: 711 South Kark rumber Street Chicago, | nes you lived in the last 3 | pears. Do not include volume by Dates Debtor 1 lived there From 06/01/2015 To 02/01/2018 | where you live now. Debtor 2: Same as Debtor 1 Number Street City State ZIF | Iived there Same as Debto From To Code |
| No Yes | s. List all of the place ebtor 1: 711 South Kark Number Street Chicago, | nes you lived in the last 3 | pears. Do not include volume between Dates Debtor 1 lived there From 06/01/2015 To 02/01/2018 | where you live now. Debtor 2: Same as Debtor 1 Number Street City State ZIF | lived there Same as Debtor From To Code |
| No Yes | s. List all of the place ebtor 1: 711 South Kark rumber Street Chicago, | nes you lived in the last 3 | pears. Do not include v Dates Debtor 1 lived there From 06/01/2015 To 02/01/2018 | where you live now. Debtor 2: Same as Debtor 1 Number Street City State ZIF | Iived there Same as Debtor From To Code Same as Debtor From |
| No Yes | ebtor 1: 711 South Karle Number Street Chicago, | IL 60624 State ZIP Code | pears. Do not include v Dates Debtor 1 lived there From 06/01/2015 To 02/01/2018 | where you live now. Debtor 2: Same as Debtor 1 Number Street City State ZIF Number Street | Iived there Same as Debtor From To Code Same as Debtor From |
| No Yes | s. List all of the place ebtor 1: 711 South Kark rumber Street Chicago, | nes you lived in the last 3 | pears. Do not include v Dates Debtor 1 lived there From 06/01/2015 To 02/01/2018 | where you live now. Debtor 2: Same as Debtor 1 Number Street City State ZIF Number Street | Iived there Same as Debtor From To Code Same as Debtor From |
| No Yes | ebtor 1: 711 South Karlo Number Street Chicago, City | IL 60624 State ZIP Code | pears. Do not include v Dates Debtor 1 lived there From 06/01/2015 To 02/01/2018 From To | where you live now. Debtor 2: Same as Debtor 1 Number Street City State ZIF Number Street City State ZIF | Ilived there Same as Debto From To Code Same as Debto From To ZIP Code |
| No Yes Do | ebtor 1: 711 South Karle Number Street Chicago, City Street | IL 60624 State ZIP Code | pouse or legal equiva | where you live now. Debtor 2: Same as Debtor 1 Number Street City State ZIF Number Street | Ilived there Same as Debto From To Code Same as Debto From To ZIP Code |
| No N | ebtor 1: 711 South Kark Number Street Chicago, City Street City the last 8 years, dand territories included | IL 60624 State ZIP Code | pouse or legal equiva | where you live now. Debtor 2: Same as Debtor 1 Number Street City State ZIF Number Street City State ZIF Same as Debtor 1 Number Street | Ilived there Same as Debto From To Code Same as Debto From To ZIP Code |

Case 18-23900 Doc 1 Filed 08/24/18 Entered 08/24/18 08:54:51 Desc Main Document Page 42 of 54

| ebtor 1 | Lakena First Name Middle Nam | D. | Staples | Case nu | mber (if known) | | | | | | | |
|----------|---|---------------------------------|--|--|--|--|--|--|--|--|--|--|
| | | | | | | | | | | | | |
| Fil | Did you have any income from employment or from operating a business during this year or the two previous calendar years? ill in the total amount of income you received from all jobs and all businesses, including part-time activities. you are filing a joint case and you have income that you receive together, list it only once under Debtor 1. | | | | | | | | | | | |
| 3 | No Yes. Fill in the details. | | | | | | | | | | | |
| | | | Debtor 1 | 90 | Debtor 2 | | | | | | | |
| | | | Sources of income Check all that apply. | Gross income (before deductions and exclusions) | Sources of income Check all that apply. | Gross income (before deductions and exclusions) | | | | | | |
| | From January 1 of curre the date you filed for ba | | Wages, commissions, bonuses, tips Operating a business | \$ 25,241.00 | ☐ Wages, commissions, bonuses, tips☐ Operating a business | \$ | | | | | | |
| | For last calendar year: (January 1 to December 3 | 31.2017 | ✓ Wages, commissions, bonuses, tips✓ Operating a business | \$ 18,931.00 | Wages, commissions, bonuses, tips Operating a business | \$ | | | | | | |
| | For the calendar year be | YYYY | ☐ Wages, commissions, | | ☐ Wages, commissions, | | | | | | | |
| | (January 1 to December 3 | | bonuses, tips Operating a business | \$0.00 | bonuses, tips Operating a business | \$ | | | | | | |
| Lis | mbling and lottery winnings. t each source and the gross No | | | | | e under Debtor 1. | | | | | | |
| | Yes. Fill in the details. | | Debtor 1 | | Debtor 2 | | | | | | | |
| | | | Sources of income Describe below. | Gross income from each source (before deductions and exclusions) | Sources of income Describe below. | Gross income from each source (before deductions and exclusions) | | | | | | |
| | From January 1 of curre the date you filed for ba | | | \$ | | \$ | | | | | | |
| | | | | | | | | | | | | |
| | For last calendar year: | | | \$ | | \$ | | | | | | |
| | (January 1 to December 3 | 31, <mark>2017</mark>) YYYY | | \$ | | \$ | | | | | | |
| | For the calendar year be | efore that: | | \$ | | \$ | | | | | | |
| | (January 1 to December 3 | 31, <u>2016</u>) | | | | \$ | | | | | | |

Case 18-23900 Doc 1 Filed 08/24/18 Entered 08/24/18 08:54:51 Desc Main Document Page 43 of 54

| Part 3: List Certain Payments You Made Before You Filed for Bankruptcy 6. Are either Debtor 1's or Debtor 2's debts primarily consumer debts? No. Neither Debtor 1 nor Debtor 2 has primarily consumer debts. Consumer debts are defined in 11 to "incurred by an individual primarily for a personal, family, or household purpose." | | | | | | | | | | | | | | |
|--|---|--|--|--|--|--|--|--|--|--|--|--|--|--|
| 6. Are either Debtor 1's or Debtor 2's debts primarily consumer debts? □ No. Neither Debtor 1 nor Debtor 2 has primarily consumer debts. Consumer debts are defined in 11 to | | | | | | | | | | | | | | |
| 6. Are either Debtor 1's or Debtor 2's debts primarily consumer debts? □ No. Neither Debtor 1 nor Debtor 2 has primarily consumer debts. Consumer debts are defined in 11 to | | | | | | | | | | | | | | |
| ☐ No. Neither Debtor 1 nor Debtor 2 has primarily consumer debts. Consumer debts are defined in 11 l | | | | | | | | | | | | | | |
| ☐ No. Neither Debtor 1 nor Debtor 2 has primarily consumer debts. Consumer debts are defined in 11 l | | | | | | | | | | | | | | |
| No. Neither Debtor 1 nor Debtor 2 has primarily consumer debts. Consumer debts are defined in 11 l "incurred by an individual primarily for a personal, family, or household purpose." | | | | | | | | | | | | | | |
| | 9? | | | | | | | | | | | | | |
| During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$6,425* or more | | | | | | | | | | | | | | |
| ☐ No. Go to line 7. | | | | | | | | | | | | | | |
| Yes. List below each creditor to whom you paid a total of \$6,425* or more in one or more paymen total amount you paid that creditor. Do not include payments for domestic support obligations child support and alimony. Also, do not include payments to an attorney for this bankruptcy of | s, such as | | | | | | | | | | | | | |
| * Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of a | | | | | | | | | | | | | | |
| Yes. Debtor 1 or Debtor 2 or both have primarily consumer debts. | Debtor 1 or Debtor 2 or both have primarily consumer debts. | | | | | | | | | | | | | |
| During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more? | | | | | | | | | | | | | | |
| ☐ No. Go to line 7. | | | | | | | | | | | | | | |
| Yes. List below each creditor to whom you paid a total of \$600 or more and the total amount you | naid that | | | | | | | | | | | | | |
| creditor. Do not include payments for domestic support obligations, such as child support an alimony. Also, do not include payments to an attorney for this bankruptcy case. | d | | | | | | | | | | | | | |
| annony. Also, do not include payments to an attorney for this bankruptcy case. | | | | | | | | | | | | | | |
| Dates of Total amount paid Amount you payment | still owe Was this payment for | | | | | | | | | | | | | |
| | ,400.00 | | | | | | | | | | | | | |
| Creditor's Name | ✓ wortgage | | | | | | | | | | | | | |
| PO Box 551888 06/01/2018 Number Street | Credit card | | | | | | | | | | | | | |
| 05/01/2018 | Loan repayment | | | | | | | | | | | | | |
| Haring the state of the state o | ☐ Suppliers or vendors | | | | | | | | | | | | | |
| Detroit MI 48255 City State ZIP Code | Other | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | |
| <u> </u> | Mortgage | | | | | | | | | | | | | |
| Creditor's Name | Car | | | | | | | | | | | | | |
| Number Street | Credit card | | | | | | | | | | | | | |
| | Loan repayment | | | | | | | | | | | | | |
| | ☐ Suppliers or vendors | | | | | | | | | | | | | |
| City State ZIP Code | ☐ Other | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | |
| Creditor's Name \$\$ | Mortgage | | | | | | | | | | | | | |
| | ☐ Car | | | | | | | | | | | | | |
| Number Street | Credit card | | | | | | | | | | | | | |
| | Loan repayment | | | | | | | | | | | | | |
| | Suppliers or vendors Other | | | | | | | | | | | | | |
| City State ZIP Code | Other | | | | | | | | | | | | | |

Case 18-23900 Doc 1 Filed 08/24/18 Entered 08/24/18 08:54:51 Desc Main Document Page 44 of 54

| 1 | Lakena | | D. | | Staples | | Case number (if known) | |
|--------------------------------|--|--|---|-----------------------------------|---|--|--|--|
| | First Name | Middle Name | | Last Name | | • | | |
| n <i>side</i> orpo igent | ers include your brations of which t, including one as child suppor | relatives; and n you are an of for a busines | y gener officer, o s you o | al partners; ri director, pers | elatives of any on in control, or | general partners; partners; partners; partners | artnerships of whicl nore of their voting | who was an insider? In you are a general partner; securities; and any managing domestic support obligations, |
| | es. List all payn | nents to an in | sider. | | Dates of payment | Total amount paid | Amount you still owe | Reason for this payment |
| | | | | | | \$ | \$ | |
| | Insider's Name | | | | | | | |
| | Number Street | | *************************************** | | | | | |
| | City | | State | ZIP Code | | | | |
| | | | | | | \$ | \$ | |
| | Insider's Name | | | | | | | |
| | Number Street | | | | | | | |
| | | | | | | | | |
| | City | | State | ZIP Code | | | | |
| an in | sider? de payments or | | | | | payments or trans | fer any property o | n account of a debt that benefit |
| | io 'es. List all payr | nents that be | nefited | an insider. | | | | |
| | | | | | Dates of payment | Total amount paid | Amount you still owe | Reason for this payment Include creditor's name |
| | Insider's Name | | | | - | \$ | \$ | |
| | Number Street | | | | | | | |
| | City | | State | ZIP Code | · LANGELING AND | | | |
| | | | | | | | | |
| | Insider's Name | | | | | \$ | \$ | |
| | Number Street | | | | | | | |
| | | | | | | | | |
| | City | | State | ZIP Code | - | | | |

Case 18-23900 Doc 1 Filed 08/24/18 Entered 08/24/18 08:54:51 Desc Main Document Page 45 of 54

| ebtor 1 | Lakena | <u> </u> | Staples | Case numbe | lf (if known) | | |
|---------------------|---------------------------|--------------------------------|---------------------------|---|-----------------|--|----------------------|
| | First Name Middle I | Name Last Name | | | | | |
| Significant Control | 3 | | | | | | |
| art 4: | Identify Legal A | ctions, Repossessi | ons, and Foreclosu | res | | | |
| | | | | lawsuit, court action, o | | | |
| | | ng personal injury case | es, small claims actions, | divorces, collection suits | s, paternity ac | tions, support | or custody modificat |
| _ | ontract disputes. | | | | | | |
| Z | | | | | | | |
| LE Y | es. Fill in the details. | | | 0 | | | Status of the case |
| | | | ture of the case | Court or agency | y | | Status of the case |
| , | 0 | | | A-47-47-47-47-47-47-47-47-47-47-47-47-47- | | <u>. </u> | — Pending |
| , | Case title | | | Court Name | | | On appeal |
| - | | | | Number Street | | | Concluded |
| | | | | Number Street | | | Concluded |
| (| Case number | | | City | State ZI | P Code | |
| | | | | 0.1, | 3.2.0 | | |
| | | | | | | | Pending |
| (| Case title | | | Court Name | | | On appeal |
| | | | | *************************************** | | | On appear Concluded |
| | | | | Number Street | | | La Concluded |
| (| Case number | | | City | State Zi | P Code | |
| | es. Fill in the informati | | Describe the prop | ertv | | Date | Value of the propert |
| | | | | | | | |
| | Credit Accepta | ance | 2010 Honda (| CRV | | 08/01/2018 | s 2,000.00 |
| | Creditor's Name | Market Western Control Control | | | , | | Ψ |
| | PO Box 55188 | 38 | | | | | |
| | Number Street | | Explain what hap | | | | |
| | | | Property wa | s repossessed. | | | |
| | | | , | s foreclosed. | | | |
| | Detroit | MI 48255 | Property wa | | | | |
| | City | State ZIP Code | ☐ Property wa | s attached, seized, or lev | vied. | | |
| | | | Describe the prop | erty | | Date | Value of the proper |
| | | | | | | | \$ |
| | Creditor's Name | | | | | | · |
| | Number Street | | Evaloin what han | nanad | | | |
| | | | Explain what hap | peneu | | | |
| | | | | s repossessed. | | | |
| | | | | s foreclosed. | | | |
| | City | State ZIP Code | | is garnished. | dod | | |
| | | | Property wa | is attached, seized, or le- | viea. | | |

Official Form 107

Case 18-23900 Doc 1 Filed 08/24/18 Entered 08/24/18 08:54:51 Desc Main Document Page 46 of 54

| Debtor 1 | Lakena | D. | Staples | Case number (# known) | |
|-------------|--|--|------------------------------------|--|------------------|
| | First Name | Middle Name Last N | lame | | |
| | | | | | |
| | | | | | |
| | | ore you filed for bankrup to make a payment bec | | a bank or financial institution, set off any a | mounts from your |
| | | to make a payment bec | ause you owed a debt? | | |
| Ø | | | | | |
| | Yes. Fill in the d | etails. | | | |
| | | | Describe the action the creditor t | took Date action | Amount |
| | | | | was taken | |
| | Creditor's Name | | | | |
| | | | | | \$ |
| | Number Street | | | | <u> </u> |
| | | | | | |
| | | | • | | |
| | | | | | |
| | City | State ZIP Code | Last 4 digits of account number | : XXXX | |
| | | | | | |
| | | | | the possession of an assignee for the bene | fit of |
| | | appointed receiver, a cus | stodian, or another official? | | |
| | No | | | | |
| | Yes | | | | |
| | 3952 | | | | |
| Part 5 | List Certa | in Gifts and Contribu | tions | | |
| PANELTANIAN | | · | | | |
| 13. Wit | hin 2 years befo | ore you filed for bankrup | tcy, did you give any gifts with a | a total value of more than \$600 per person? | |
| | No | | | | |
| | | etails for each gift. | | | |
| | res. Fill ill tile u | etails for each gift. | | | |
| | Cifte with a tota | I value of more than \$600 | Describe the gifts | Dates you gave | Value |
| | per person | ii vaide of more than 9000 | beautibe the girts | the gifts | · uiac |
| | | | | e e e e e e e e e e e e e e e e e e e | |
| | | | | | _ |
| | Person to Whom You | J Gave the Gift | - | *************************************** | \$ |
| | | | | | |
| | | | - | | \$ |
| | | | | | |
| | Number Street | | • | | |
| | | | | | |
| | City | State ZIP Code | - | | |
| | , | | | | |
| | Person's relations | hip to you | | | |
| | | | | | |
| | | value of more than \$600 | Describe the gifts | Dates you gave | Value |
| | per person | | | the gifts | |
| | | | | | |
| | Person to Whom You | · Caro the Ciff | ~ | *************************************** | \$ |
| | r erson to vyriom ¥0t | a Save the Ont | | | |
| | | | | | \$ |
| | and the second of the second o | The second secon | | *************************************** | • |
| | | | | | |
| | Number Street | | • | | |
| | | | | | |
| | City | State ZIP Code | - | | |
| | | | | | |
| | Person's relations | hip to you | | | |

Case 18-23900 Doc 1 Filed 08/24/18 Entered 08/24/18 08:54:51 Desc Main Document Page 47 of 54

| ebtor 1 | Lakena First Name | Middle Name | Last Name | Staples | Case number (if known) | | · · · · · · · · · · · · · · · · · · · |
|------------|---|---|-------------------------------------|--|--------------------------------|--|---------------------------------------|
| | | | | | | | |
| .Wit | hin 2 years befo | re you filed for ba | ınkruptcy, d | id you give any gifts or cont | tributions with a total valu | e of more than \$6 | 00 to any charity? |
| | | etails for each gift | or contributio | n. | | | |
| | Gifts or contributing that total more t | utions to charities han \$600 | Des | cribe what you contributed | | Date you contributed | Value |
| | Charity's Name | | | | | | \$ |
| | | | eth cath catholistic and the second | | | Alleh Madilly alley alresh suse ears during a shreet | \$ |
| | Number Street | | | | | | |
| | City State | ZIP Code | | | | | |
| art (| List Cert | ain Losses | | | | | |
| | Describe the prohow the loss oc | operty you lost and curred | Incl clai | scribe any insurance coverage f ude the amount that insurance ha ms on line 33 of Schedule A/B: Pr | s paid. List pending insurance | Date of your loss | Value of property lost |
| | | | | | · • | | \$ |
| | | | | | | | |
| you Inc | thin 1 year befor u consulted abo | out seeking bankri ys, bankruptcy peti | nkruptcy, di uptcy or pre | d you or anyone else acting paring a bankruptcy petitior s, or credit counseling agencie | 1? | | to anyone |
| | 1.675 - 1.61 - 7 | | | scription and value of any prope | · | Date payment or transfer was made | Amount of paymen |
| | Person Who Was F | - alu | | | | | rh. |
| | Number Street | | ····· | | | | ъ \$ |
| | City | State ZIP (| Code | | | *************************************** | * |
| | Email or website ac | idress | | | | | |
| | Person Who Made | the Payment, if Not You | | | | | |

Case 18-23900 Doc 1 Filed 08/24/18 Entered 08/24/18 08:54:51 Desc Main Document Page 48 of 54

| Debtor 1 | Lakena | D. Ile Name Last Ne | Staples | Case number (# known) | | |
|------------------|--|--|--|---------------------------------------|---|---|
| | First Name Midc | ile Name Last Na | ane | | | |
| | *** | | Description and value of any property | transferred | Date payment or transfer was made | Amount of payment |
| | Person Who Was Paid | - Andrew Service of the Contract of the Contra | | | *************************************** | \$ |
| | Number Street | | | | | \$ |
| | | | | | | |
| | Čity | State ZIP Code | | | | |
| | Email or website address | | | | | |
| | Person Who Made the Pay | | | | | |
| pro | omised to help you d | eal with your credite | cy, did you or anyone else acting or ors or to make payments to your cr | n your behalf pay or tran editors? | sfer any property t | to anyone who |
| | not include any paym No | ent or transier trial y | ou listed on line 10. | | | |
| | Yes. Fill in the details | , | Description and value of any property | r transferred | Date payment or | Amount of paymer |
| | | | | | transfer was made | |
| | Person Who Was Paid | | | | | |
| | Number Street | | | | | \$ |
| | | | | | | \$ |
| | City | State ZIP Code | | | | |
| tra Ind Do | ansferred in the ordir clude both outright tran | nary course of your nsfers and transfers r transfers that you ha | otcy, did you sell, trade, or otherwise business or financial affairs? made as security (such as the granting we already listed on this statement. | | nortgage on your pr | operty). |
| | | | Description and value of property transferred | or debts paid in excha | inge | was made |
| | Person Who Received Tr | ansfer | | | | |
| | Number Street | | | | | group of the control |
| | | | | | | |
| | City | State ZIP Code | | | | |
| | Person's relationship | to you | | | | |
| | Person Who Received Ti | ransfer | | | | |
| | Number Street | | | | | |
| | City | State ZIP Code | | | | |
| | Person's relationship | to you | | | | |

Case 18-23900 Doc 1 Filed 08/24/18 Entered 08/24/18 08:54:51 Desc Main Document Page 49 of 54

| are a benefic No No Name of tra | ars before you filed for banks ciary? (These are often called in the details. | Description and value of the prope | | | hich you Date transfer was made |
|---|---|--|------------------------------------|---|---|
| are a benefice No No Name of tra | ciary? (These are often called n the details. | asset-protection devices.) Description and value of the prope | rty transferred | | Date transfer |
| are a benefice No No No Name of tra | ciary? (These are often called n the details. | asset-protection devices.) Description and value of the prope | rty transferred | | Date transfer |
| No Yes. Fill in Name of tra | n the details. ust | Description and value of the prope | • | | |
| Name of tra | ust | | • | | |
| Name of tra | ust | | • | | |
| | | | • | | |
| | | | | | was made |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | ts, instruments, Safe Deposit | | | |
| | | | ···· | | |
| | | ptcy, were any financial accounts o | r instruments held in | your name, or for your | benefit, |
| | l, moved, or transferred? cking, savings, monev marke | t, or other financial accounts; cert | ficates of deposit; sha | ares in banks, credit un | ions, |
| | | eratives, associations, and other fir | | · | , |
| ☑ No | | | | | |
| Yes. Fill | in the details. | | | | |
| | | Last 4 digits of account number | Type of account or instrument | Date account was closed, sold, moved, | Last balance befor closing or transfer |
| | | | mştrumem | or transferred | closing of transfer |
| Name of F | inancial Institution | _ | [^m] ~ | | _ |
| | | xxxx | Checking | *************************************** | \$ |
| Number | Street | A44 | Savings | | |
| *************************************** | | _ | ☐ Money market ☐ Brokerage | | |
| City | State ZIP Code | ••• | Other | | |
| , | | | Utner | | |
| | | XXXX- | Checking | | \$ |
| Name of F | Financial Institution | | Savings | *************************************** | <u> </u> |
| | | | g- | | |
| At | Chroni | _ | Money market | | |
| Number | Street | _ | Money market | | |
| Number | Street | | ☐ Money market ☐ Brokerage ☐ Other | | |

Case 18-23900 Doc 1 Filed 08/24/18 Entered 08/24/18 08:54:51 Desc Main Document Page 50 of 54

| Debtor 1 | Lakena First Name M | D. | Staples | Case number (# known) | A A |
|-------------------|-----------------------------|------------------------|--|---|--------------------------|
| | | | | Mark of the Printer to the December of | |
| 22. Have | | ty in a storage unit o | or place other than your nome | within 1 year before you filed for bankruptcy? | |
| ☐ Y | es. Fill in the detai | ls. | | | D |
| | | | Who else has or had access to | it? Describe the contents | Do you still have it? |
| | | | | | □ No |
| | Name of Storage Facilit | у | Name | | ☐ Yes |
| | Number Street | | Number Street | | |
| | | | City State ZIP Code | | |
| | City | State ZIP Code | | | |
| Part 9 | Identify Pr | operty You Hold (| or Control for Someone Els | ta | |
| A 425 - 526 (\$6) | × 12 | | | ny property you borrowed from, are storing for, | |
| or h | old in trust for son | | | ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, | |
| | No Yes. Fill in the deta | ile. | | | |
| | | | Where is the property? | Describe the property | Value |
| | | | | | |
| | Owner's Name | | | | \$ |
| | Number Street | | Number Street | | |
| | | | | | |
| | City | State ZIP Code | City State | ZIP Code | |
| Part 1 | 0: Give Detai | is About Environn | nental Information | | |
| For the | nurnose of Part 1 | 0, the following defi | nitions apply: | | |
| a Env | vironmental law me | ans any federal, sta | te, or local statute or regulation | n concerning pollution, contamination, releases | |
| | | | r material into the air, land, so ng the cleanup of these subst | il, surface water, groundwater, or other medium, ances, wastes, or material. | |
| | _ | • | | onmental law, whether you now own, operate, or | |
| | | | it, including disposal sites. | | |
| | | | vironmental law defines as a l contaminant, or similar term. | nazardous waste, hazardous substance, toxic | |
| Report | all notices, release | es, and proceedings | that you know about, regard! | ess of when they occurred. | |
| 24 Has | any governmental | unit potified you th | at you may be liable or potenti | ally liable under or in violation of an environmen | tal law? |
| | | unit violation you an | ,,, | | |
| Ø | No Yes. Fill in the deta | site | | | |
| | 103. I iii iii tilo dott | | Governmental unit | Environmental law, if you know it | Date of notice |
| | | | , . | · • | |
| | Name of site | | Governmental unit | | |
| | | | | | |
| | Number Street | | Number Street | | |
| | | | City State ZIP Cod | 0 | |
| | City | State ZIP Code | | | |

Case 18-23900 Doc 1 Filed 08/24/18 Entered 08/24/18 08:54:51 Desc Main Document Page 51 of 54

| Debtor 1 | Lakena First Name Midd | D. | Staples | Case number (if known) | |
|-------------------------|---------------------------|-----------------------|---|--|-------------------------------|
| | | | | | |
| | | vernmental unit of | any release of hazardous mater | rial? | |
| A | | | | | |
| u | Yes. Fill in the details | S. | Q | For the second the second terms in | Date of notice |
| | | | Governmental unit | Environmental law, if you know it | Date of notice |
| | | | | | |
| | Name of site | | Governmental unit | _ | |
| | Number Street | | Number Street | _ | |
| | Homber Once. | | Matthan Sueer | | |
| | | | City State ZiP Code | | |
| | | | • | | |
| | City | State ZIP Code | | | |
| 26. Hav | e you been a party ir | n any judicial or adi | ministrative proceeding under a | ny environmental law? Include settleme | nts and orders. |
| | | | | | |
| | Yes. Fill in the detail | S. | | | |
| | | | Court or agency | Nature of the case | Status of the case |
| | | | | | Lase |
| | Case title | | Court Name | | Pending |
| | | | Court reasto | | On appeal |
| | | | Number Street | | Concluded |
| | | | | | |
| | Case number | | City State ZIP C | ode | |
| - Accordance (Alexander | W44130W400W | | | | |
| Part ^s | A Give Details | About Your Bus | siness or Connections to An | y Business | |
| 27. W it | - | | | have any of the following connections to | o any business? |
| | | | | activity, either full-time or part-time | |
| | A member of a li | | pany (LLC) or limited liability par | rtnersnip (LLP) | |
| | | • | ecutive of a corporation | | |
| | | | g or equity securities of a corpo | oration | |
| F-70 | | | | | |
| | No. None of the abo | | art 12. In the details below for each bu | einace | |
| - | res. Officer an trial o | ippry above and m | Describe the nature of the busine | | on number |
| | Business Name | | | Do not include Socia | Security number or ITIN. |
| | pusifiess Hame | | | EIM. | |
| | Number Street | | | EIN: | manus manus manus minus minus |
| | | | Name of accountant or bookkeep | per Dates business exist | ed |
| | | | | | |
| | | | | From1 | · |
| | City | State ZIP Code | Describe the nature of the busin | ess Employer Identificati | on number |
| | | | Describe the nature of the busin | | I Security number or ITIN. |
| | Business Name | | | | • |
| | - | | | EIN: | |
| | Number Street | | Name of accountant or bookkeep | per Dates business exist | ed |
| | | | • | | |
| | | | | From 1 | Го |
| | Olt | CALL TID CLAS | • | | |

Case 18-23900 Doc 1 Filed 08/24/18 Entered 08/24/18 08:54:51 Desc Main Document Page 52 of 54

Case number (If known)_

Staples

| Contracts and Unexpired Leases (Official Form 106G) ses that are still in effect; the lease period has not yet ot assume it. 11 U.S.C. § 365(p)(2). |
|--|
| Will the lease be assumed? |
| □ No |
| ☐ Yes |
| □ No |
| Yes |
| And An Anthony or Control of Cont |
| □ No |
| ☐ Yes |
| |

Lakena First Name

Debtor 1

Case 18-23900 Doc 1 Filed 08/24/18 Entered 08/24/18 08:54:51 Desc Main Document Page 53 of 54

| Fill in this in | formation to ide | entify your case: | |
|------------------------|----------------------|---------------------------------|-----------|
| Debtor 1 | Lakena First Name | D, | Staples |
| Debtor 2 | | Middle Name | Last Name |
| (Spouse, if filing) | First Name | Middle Name | Last Name |
| United States f | Bankruptcy Court fo | or the: Northern District of II | nois |
| Case number (If known) | | | |
| | | | |

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

12/15

If you are an individual filing under chapter 7, you must fill out this form if:

- creditors have claims secured by your property, or
- you have leased personal property and the lease has not expired.

You must file this form with the court within 30 days after you file your bankruptcy petition or by the date set for the meeting of creditors, whichever is earlier, unless the court extends the time for cause. You must also send copies to the creditors and lessors you list on the form.

If two married people are filing together in a joint case, both are equally responsible for supplying correct information. Both debtors must sign and date the form.

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known).

Part II: List Your Creditors Who Have Secured Claims

| Identify the creditor and the property that is collateral | What do you intend to do with the property that secures a debt? | Did you claim the propert as exempt on Schedule C |
|---|--|---|
| Creditor's name: D/N/A | ☐ Surrender the property. | ☐ No |
| Description of | Retain the property and redeem it. | Yes |
| property securing debt: | Retain the property and enter into a Reaffirmation Agreement. | |
| | Retain the property and [explain]: | |
| Creditor's name: | ☐ Surrender the property. | □ No |
| | Retain the property and redeem it. | Yes |
| Description of property securing debt: | Retain the property and enter into a Reaffirmation Agreement. | - 165 |
| | Retain the property and [explain]: | |
| Creditor's name: | ☐ Surrender the property. | □ No |
| Description of | Retain the property and redeem it. | Yes |
| property securing debt: | Retain the property and enter into a Reaffirmation Agreement. | |
| | Retain the property and [explain]: | |
| Creditor's name: | Surrender the property. | □ No |
| | Retain the property and redeem it. | Yes |
| Description of property securing debt: | Retain the property and enter into a Reaffirmation Agreement. | |
| | Retain the property and [explain]: | |
| | | |

Case 18-23900 Doc 1 Filed 08/24/18 Entered 08/24/18 08:54:51 Desc Main Document Page 54 of 54

| | Middle Name Last | Staples Name | Case number (# known) |
|--|--|--|--|
| | | | |
| | | Describe the nature of the business | Employer Identification number |
| Business Name | | · · · · · · · · · · · · · · · · · · · | Do not include Social Security number or ITIN |
| | | | EIN: |
| Number Street | t | Name of accountant or bookkeeper | Dates business existed |
| | | - | : |
| City | State ZIP Code | - | From To |
| | | | |
| | and the second s | | |
| | efore you filed for bankru litors, or other parties. | ptcy, did you give a financial stateme | ent to anyone about your business? Include all financial |
| No | | | |
| | e details below. | | |
| | | Date issued | |
| | | | |
| Name | | MM / DD / YYYY | |
| | | | |
| Number Stree | et | - | |
| *************************************** | | _ | |
| | | | |
| | | | |
| City | State ZIP Code | - | |
| City | State ZIP Code | - | |
| City | State ZIP Code | _ | |
| | | - | |
| 2: Sign Be | alow | | |
| 2: Sign Be have read the a swers are tru connection w | alow answers on this Stateme | nd that making a false statement, co | nments, and I declare under penalty of perjury that the ncealing property, or obtaining money or property by frau nprisonment for up to 20 years, or both. |
| 2: Sign Be ave read the a swers are tru connection w | answers on this <i>Stateme</i> re and correct. I understavith a bankruptcy case care, 1341, 1519, and 3571. | nd that making a false statement, co | ncealing property, or obtaining money or property by fraunprisonment for up to 20 years, or both. |
| Sign Be ave read the swers are tru connection word. U.S.C. §§ 152 | answers on this <i>Stateme</i> re and correct. I understavith a bankruptcy case case, 1341, 1519, and 3571. | and that making a false statement, co in result in fines up to \$250,000, or in | ncealing property, or obtaining money or property by fraunprisonment for up to 20 years, or both. |
| Sign Be ave read the swers are tru connection we U.S.C. §§ 152 | answers on this Statemers and correct. I understavith a bankruptcy case ca 2, 1341, 1519, and 3571. Manage of the statemers | and that making a false statement, con result in fines up to \$250,000, or in Signature of Debtor | ncealing property, or obtaining money or property by frau nprisonment for up to 20 years, or both. |
| Sign Be ave read the aswers are tru connection we U.S.C. §§ 152 | answers on this Statemers and correct. I understavith a bankruptcy case ca 2, 1341, 1519, and 3571. Manage of the statemers | and that making a false statement, con result in fines up to \$250,000, or in Signature of Debtor | ncealing property, or obtaining money or property by fraunprisonment for up to 20 years, or both. |
| Sign Be lave read the swers are tru connection we U.S.C. §§ 152 Signature of Date 2 2 3 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 | answers on this Statemers and correct. I understavith a bankruptcy case ca 2, 1341, 1519, and 3571. Manage of the statemers | and that making a false statement, con result in fines up to \$250,000, or in Signature of Debtor | ncealing property, or obtaining money or property by fraunprisonment for up to 20 years, or both. |
| Sign Be ave read the aswers are tru connection we U.S.C. §§ 152 Signature of Date Date No Yes | answers on this Stateme se and correct. I understa with a bankruptcy case ca 2, 1341, 1519, and 3571. Debtor 1 DU-200 additional pages to Your | and that making a false statement, come result in fines up to \$250,000, or in Signature of Debtor Date | ncealing property, or obtaining money or property by fraunprisonment for up to 20 years, or both. |
| Sign Be ave read the swers are tru connection we U.S.C. §§ 152 Signature of Date Date No Yes d you pay or a | answers on this Stateme se and correct. I understa with a bankruptcy case ca 2, 1341, 1519, and 3571. Debtor 1 DU-200 additional pages to Your | and that making a false statement, con result in fines up to \$250,000, or in Signature of Debtor | ncealing property, or obtaining money or property by fraunting property by fraunting money or property by fraunting for up to 20 years, or both. |
| Sign Be ave read the swers are tru connection we U.S.C. §§ 152 Signature of Date Date No Yes No | answers on this Statemers on this Statemers on this Statemers on this Statemers of the stat | and that making a false statement, come result in fines up to \$250,000, or in Signature of Debtor Date | ncealing property, or obtaining money or property by fraunting property by fraunting money or property by fraunting for up to 20 years, or both. |